## 9500014524

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone #)	
PICK-UP	WAIT M	AIL
(Bus	siness Entity Name)	
(Doc	cument Number)	
Certified Copies	Certificates of Status _	
Special Instructions to F	Filing Officer:	
,		

W14WW)2720

FEB 1 7 2015

T. SCOTT



700266920237

12/04/14--01009--001 \*\*128.75

15 FEB 11 AH 9:

## **COVER LETTER**

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

SUBJECT:	Transfer Indiana company to Florida
Enclosed is an o	riginal and one (1) copy of the Certificate of Domestication and a check for:
FEES:	
Articles	e of Domestication \$ 50.00 of Incorporation and Certified Copy \$ 78.75 domesticate and file \$128.75
OPTIONAL:	
Certifica -	white Stone Coupital Partners Inc  Name (printed or typed)
	3801 PEA Blvd, Suik 600
	Palm Beach Garclens, FL 33400 City, State & Zip
	937.609.8213 Daytime Telephone Number
	E-mail address: (to be used for future annual report notification)



December 5, 2014

WHITESTONE 3801 PGA BLVD, STE 600 PALM BEACH GARDENS, FL 33400

SUBJECT: WHITESTONE CAPITAL PARTNERS

Ref. Number: W14000072720

We have received your document for WHITESTONE CAPITAL PARTNERS and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 014A00025716

## CERTIFICATE OF DOMESTICATION

The undersigned,	Chris	Campbell	,	President	,	
-	(N	ame)		(Title)		
of Uhile St	ane Cop	ital Partne	ers, Inc.	a foreigr	corporation,	
in accordance with s. 6	(Corporation I	Name)				
1. The date on which	corporation wa	as first formed wa	s <u>Oc</u> +	19	. <u>Buc</u> ,	
<ol><li>The jurisdiction where came into being was</li></ol>						
3. The name of the co	rporation imm	ediately prior to t	he filing of this C	Certificate of Do	mestication	
4. The name of the co s. 607.0202 and 60'	rporation, as s	et forth in its artic	les of incorporati	ion, to be filed p	oursuant to	rs, hc-
5. The jurisdiction that administration of the immediately before	e corporation,	, or any other equi he Certificate of I	valent jurisdictio	n under applicat		
6. Attached are Florid to s. 607.1801.	a articles of in	corporation to con	mplete the domes	tication require	ments pursuant	
I am <u>President</u>	, of	WhiteStun	e Capita	l Part	urs, Inc	
and am authorized to si	gn this Certifi	cate of Domestica	ttion on behalf of	the corporation	and have done	
and am authorized to si so this the 🌋 🖰 day o	f	DO STORES	Sanuary		2013.	
		/ (		0		
.eaa-		(Authorized Si	gnature)		15 FE	
		Filing F	ee:			
	rtificate of Do	mestication		\$ 50.00	A	eng eng
	ticles of Incor tal to domesti	poration and Ce	rtified Copy	\$ 78.75 \$128.75	<del>ن</del> ج	erig Grigi

## ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

THE NAME OF THE CORPORATION SHALL BE:		
	<del>-</del> /.	
White Stone Capital Partner	5, 11c.	
	,	
ARTICLE II PRINCIPAL OFFICE		
THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:  Principal Address	Mailing Address	
•	-	
3801 PCA Blvd, Site 600	Same	
2801 PCA Blvd, Sik 600 Palm Beach Carcles, FZ		····
33400		
NATICLE III PURPOSE  THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:		
consulting		
consulting business consulting		
angress Consulture		
<b>5</b>		
	, <u>, , , , , , , , , , , , , , , , , , </u>	
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		<u>ت</u> م

ARTICLE IV SHARES	۸ _
THE NUMBER OF SHARES OF STOCK IS: ///	shares
ARTICLE V INITIAL DIRECTORS AND/O THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:	PR OFFICERS
Title/Name	Title/Name
	address:
President, Chris Campbell	202 Carmela Cf
CONSTRUCTION CONSTRUCTION	Jupiter, PL 33478
Title/Name	Title/Name
Title/Name	Title/Name
Title/Name	Title/Name

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS
THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:
Chris Campbell
3801 PEA Blyd, Suite 600
Palm Beach Gardens, PL 33400
ARTICLE VII INCORPORATOR
THE NAME AND ADDRESS OF THE INCORPORATOR IS:
Chris Campbell
202 Carnela C+
Jupiter FL 33478
**************************************
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR WITH AND
ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.,
() $()$ $()$ $()$ $()$ $()$ $()$ $()$
Signature/Registered Agent Date
Date . 1 /
() < > 10/21/14
Signature/Incorporator Date