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(Requestor's Name)

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PICK-UP WAIT MAIL

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CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Pierce Instruments, Inc. Florida Domestication

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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Name (printed or typed)

Address

City, State & Zip

Daytime Telephone Number

E-mail address: (to be used for future annual report notification)

CERTIFICATE OF DOMESTICATION

The undersigned, Javin C Pierce (Name) President / CEO (Title)

of Pierce Instruments, Inc (Corporation Name) a foreign corporation,

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

- 1. The date on which corporation was first formed was Sept 9 1991.
- 2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Vermont.
- 3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Pierce Instruments, Inc.
- 4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is Pierce Instruments, Inc.
- 5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was Washington County Vermont.
- 6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am Javin Pierce of 1137 Pond View Drive Wellington FL

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 9 day of March, 2019.

[Signature]
(Authorized Signature)

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TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Pierce Instruments, Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

Mailing Address

11397 Pond View Drive
Unit E202
Wellington, FL
33414

11397 Pond View Drive
Unit E202
Wellington, FL
33414

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Healthcare products and services
sales

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TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 1,000,000

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Title/Name

Title/Name

Jarvin Pierce, President CEO,
1137 Pond View Drive, E202
Wellington FL 33414

Title/Name

Title/Name

Scott Keiser, Treasurer
110 Renaissance Dr
North Palm Beach FL 33410

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:

Att: Bill Havre

Florida Registered Agent LLC

7907 4th St N STE 300

St. Petersburg FL 33702

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Travis Pierce

11397 Pond View Drive

McKinnon FL 33414

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.

Bill Havre

Signature/Registered Agent

May 1 - 2019

Date

Travis Pierce

Signature/Incorporator

Apr. 26 - 2019

Date

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19 MAY - 1 PM 12: 26
COUNTY CLERK OF STATE
PALM BEACH COUNTY, FLORIDA