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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

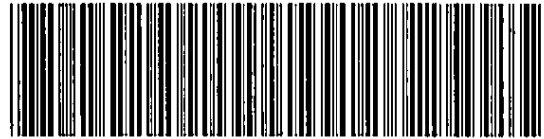
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/22/19--01019--011 **128.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

011
1013

COVER LETTER

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

SUBJECT: ASA Service Dogs Inc.

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	<u>\$78.75</u>
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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ASA Service Dogs Inc.

Name (printed or typed)

2302 East Edgewood Drive

Address

Lakeland, FL 33880

City, State & Zip

704-323-6650

Daytime Telephone Number

asaservicedogs@gmail.com

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

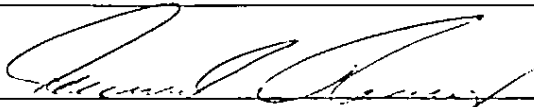
**NOT FOR PROFIT
CERTIFICATE OF DOMESTICATION**

The undersigned, Amanda Taulborg, Executive Director
(Name) (Title)
of ASA Service Dogs Inc. a foreign Corporation
(Corporation Name)
in accordance with section 617.1803, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was February 18, 2013.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was North Carolina.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was ASA Service Dogs Inc.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 617.01201 and 617.0202 with this certificate is ASA Service Dogs 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 North Carolina.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 617.1803.

I am Amanda Taulborg, of ASA Service Dogs Inc.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 17 day of October, 2019


(Authorized Signature)

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

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TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S. (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

ASA Service Dogs Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address shall be:

Principal Address

2302 East Edgewood Drive
Lakeland, FL 33880

Mailing Address

2302 East Edgewood Drive
Lakeland, FL 33880

ARTICLE III PURPOSE

The purpose for which the corporation is organized:

To provide quality trained assistance dogs to disabled individuals. Public education.

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STATE OF FLORIDA
TALLAHASSEE, FL
CLERK OF THE CIRCUIT COURT

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Board meetings and voting. Secretary keeps records of the meetings.

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

The name(s) and address(es) and specific title(s):

Title/Name

Executive Director

Amanda Taulborg

Title/Name

Secretary and Treasurer

Debbie Archer

Title/Name

Board Member

Christina Malone

Title/Name

Title/Name

Title/Name

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TALLAHASSEE, FLORIDA

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Amanda Taulborg

3536 Majesty Loop

Winter Haven, FL 33880

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Amanda Taulborg

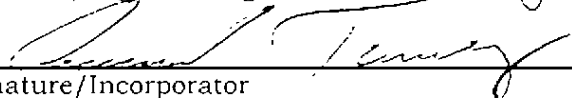
3536 Majesty Loop

Winter Haven, FL 33880

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

10-17-19
Date


Signature/Incorporator

10-17-19
Date

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TALLAHASSEE, FLORIDA