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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 NOV - 1 PM 4:11

TRANSMITTAL LETTER

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

SUBJECT: _____

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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FROM: Eric J. Odegard

Name (printed or typed)

273 Troon Court

Address

Hudson, WI 54016

City, State & Zip

715.760.1781

Daytime Telephone Number

CERTIFICATE OF DOMESTICATION

The undersigned, Eric J. Odegard, President,
(Name) (Title)

of Aliant Financial Services, Inc. a foreign corporation,
(Corporation Name)

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

1. The date on which corporation was first formed was December 12, 2001.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was State of Wisconsin.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Aliant Financial Services, 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 Aliant Financial Services, 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 State of Wisconsin.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am President, of Aliant Financial Services, Inc.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 29 day of OCTOBER, 2004.


(Authorized Signature)

Filing Fee:

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

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Aliant Financial Services, Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

1434 Kimlira Lane
Sarasota, FL 34230

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Facilitating the establishment of credit card processing on behalf of established businesses.

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:

Eric J. Odegard - President
1434 Kimlira Lane
Sarasota, FL 34230

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Eric J. Odegard
1434 Kimlira Lane
Sarasota, FL 34231

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Eric J. Odegard
1434 Kimlira Lane
Sarasota, FL 34231

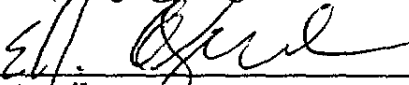
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.



Signature/Registered Agent

10-29-2004

Date



Signature/Incorporator

10-29-2004

Date