

POS000124991

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700059388927

09/12/05--01007--011 **128.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 SEP 12 PM 12:08

RECEIVED
05 SEP 12 AM 11:32
DIVISION OF CORPORATIONS

B. McKnight SEP 13 2005

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Jerry Makris CPA, P.A.

Signature _____

Requested by: WL

Name _____

Date 9/12

Time 11:00

Walk-In _____

Will Pick Up _____

Art of Inc. File _____

LTD Partnership File _____

Foreign Corp. File Domestication

L.C. File _____

Fictitious Name File _____

Trade/Service Mark _____

Merger File _____

Art. of Amend. File _____

RA Resignation _____

Dissolution / Withdrawal _____

Annual Report / Reinstatement _____

Cert. Copy _____

Photo Copy _____

Certificate of Good Standing _____

Certificate of Status _____

Certificate of Fictitious Name _____

Corp Record Search _____

Officer Search _____

Fictitious Search _____

Fictitious Owner Search _____

Vehicle Search _____

Driving Record _____

UCC 1 or 3 File _____

UCC 11 Search _____

UCC 11 Retrieval _____

Courier _____

CERTIFICATE OF DOMESTICATION

The undersigned, JERRY MAKRIS, PRESIDENT,
(Name) (Title)

of JERRY MAKRIS, C.P.A., P.C. 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 JANUARY 6, 1997.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was NEW YORK.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was JERRY MAKRIS, C.P.A., P.C.
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 JERRY MAKRIS, C.P.A., P.A.
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 NEW YORK.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am PRESIDENT, of JERRY MAKRIS, C.P.A., P.A.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 9th day of SEPTEMBER, 2005.


(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.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

JERRY MAKRIS C.P.A., P.A.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

2110 DREW STREET
CLEARWATER, FL 33765**ARTICLE III PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

TO ENGAGE IN AND CARRY ON ALL BRANCHES OF THE PRACTICE OF
ACCOUNTING WITHIN THE STATE OF FLORIDA, AND TO DO THOSE THINGS THAT
ARE NECESSARY OR PROPER IN CONNECTION WITH THAT PRACTICE.**ARTICLE IV SHARES**

THE NUMBER OF SHARES OF STOCK IS:

10,000

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

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

JERRY MAKRIS
2110 DREW STREET
CLEARWATER, FL 33765**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

JERRY MAKRIS
2110 DREW STREET
CLEARWATER, FL 33765**ARTICLE VII INCORPORATOR**

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

JERRY MAKRIS
2110 DREW STREET
CLEARWATER, FL 33765

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

9/8/05

Signature/Incorporator

Date

9/8/05

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 SEP 12 PM 12:08