

P05000161253

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

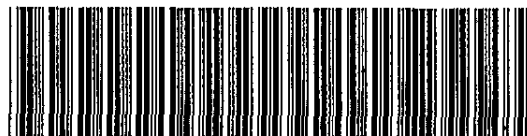
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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EFFECTIVE DATE  
11-21-1990

FILED  
05 DEC -8 PM 2:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C.F. 12-9

## 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: ALEX J. CHORBY  
Name (printed or typed)

9624 CROOKED STICK LANE  
Address

PORT ST. LUCIE, FL 34986  
City, State & Zip

772-465-8757  
Daytime Telephone Number



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

November 8, 2005

ALEX J. CHOBY  
9624 CROOKED STICK LANE  
PORT ST. LUCIE, FL 34986

SUBJECT: SOFTWARE PROFESSIONALS, INC.  
Ref. Number: W05000050254

We have received your document for SOFTWARE PROFESSIONALS, INC. and your check(s) totaling \$137.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

An effective date may be added to the Articles of Incorporation if a 2006 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

Please return the 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) 245-6047.

Carolyn Lewis  
Document Specialist  
NEW FILINGS

Letter Number: 605A00066701



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 28, 2005

ALEX J. CHOBY  
9624 CROOKED STICK LANE  
PORT ST. LUCIE, FL 34986

SUBJECT: SOFTWARE PROFESSIONALS, INC.  
Ref. Number: W05000050254

We have received your document for SOFTWARE PROFESSIONALS, INC. and your check(s) totaling \$137.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

An effective date may be added to the Articles of Incorporation if a 2006 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

Please return the 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) 245-6047.

Carolyn Lewis  
Document Specialist  
NEW FILINGS

Letter Number: 605A00066701

# CERTIFICATE OF DOMESTICATION

The undersigned, ALEX J. CHOBY, PRESIDENT  
(Name) (Title)  
of SOFTWARE PROFESSIONALS, 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 NOVEMBER 21, 1990.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was DELAWARE.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was SOFTWARE PROFESSIONALS, 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 SOFTWARE PROFESSIONALS, 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 NEW JERSEY.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am ALEX J. CHOBY, of SOFTWARE PROFESSIONALS, Inc.  
and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 4th day of NOVEMBER, 2005.

Alex J. Choby  
(Authorized Signature)

**EFFECTIVE DATE**  
11-21-1990

<b>Filing Fee:</b>	
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:

SOFTWARE PROFESSIONALS, Inc.

**ARTICLE II PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

9624 CROOKED STICK LANE  
PORT ST. LUCIE, FL 34986

**ARTICLE III PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

COMPUTER SOFTWARE CONSULTING.

**ARTICLE IV SHARES**

THE NUMBER OF SHARES OF STOCK IS:

1,500

**ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS**

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

ALEX J. CHOBY - Pres.  
VICKI L. CHOBY - V.P.

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

JOSEPH J. BITTMANN  
1532 SW MOCKINGBIRD CIRCLE  
PORT ST. LUCIE, FL 34986

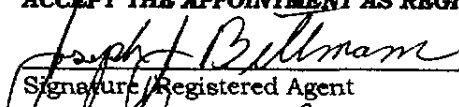
**ARTICLE VII INCORPORATOR**

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

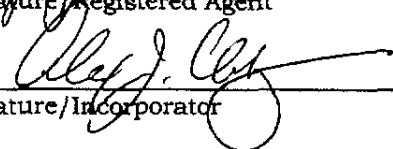
ALEX J. CHOBY  
9624 CROOKED STICK LANE  
PORT ST. LUCIE, FL 34986

\*\*\*\*\*

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

12/5/05  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

11/4/2005  
\_\_\_\_\_  
Date

FILED  
05 DEC -8 PM 2:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE  
11-21-1990