

P06000105872

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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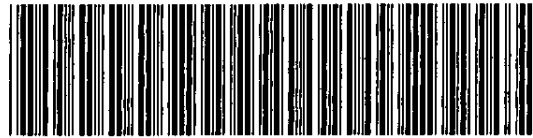
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/01/06--01049--006 **137.50

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2006 AUG 14 PM 2:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch AUG 15 2006

TRANSMITTAL LETTER

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

SUBJECT: ISLAND WINGS 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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FROM: VINCENT M LAWRENCE

Name (printed or typed)

45 CEDAR VALLEY LN

Address

HUNTINGTON, NEW YORK 11743

City, State & Zip

631-673-0658

Daytime Telephone Number



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

AUG 14 PM 2:12

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

August 3, 2006

VINCENT M LAWRENCE
45 CEDAR VALLEY LN
HUNTINGTON, NY 11743

SUBJECT: ISLAND WINGS INC
Ref. Number: W06000034140

We have received your document for ISLAND WINGS 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):

Please complete number 1 on the certificate of domestication and put the name of the registered agent in article VI.

The registered agent must sign accepting the designation.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6928.

Tim Burch
Document Specialist
New Filing Section

Letter Number: 506A00048575

CERTIFICATE OF DOMESTICATION

The undersigned, VINCENT M. LAWRENCE, PRESIDENT
(Name) (Title)
of ISLAND WINGS 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 JULY 12
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was NEW YORK STATE
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was ISLAND WINGS 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 SRL WINGS 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 YORK STATE
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am PRESIDENT, of ISLAND WINGS INC.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 9TH day of AUGUST, 2006


(Authorized Signature)

Filing Fee:

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:
SRL WINGS INC

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:
11180 66TH ST N UNIT #2 LARGO, FLORIDA 33773

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:
ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS:

1

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:
VINCENT M. LAWRENCE 45 CEDAR VALLEY LN HUNTINGTON, NEW YORK 11743


ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX **NOT** ACCEPTABLE) OF THE REGISTERED AGENT IS:
VINCENT M. LAWRENCE 11180 66TH ST N UNIT #2 LARGO, FLORIDA 33773


ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:
VINCENT M. LAWRENCE 45 CEDAR VALLEY LN HUNTINGTON, NEW YORK 11743

**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.**



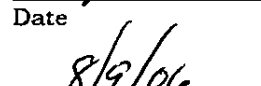
Signature/Registered Agent



Date



Signature/Incorporator



Date