Pornono 887

. (Re	questor's Name)	
(Ad	dress)	į
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	,
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TALLAHASSEE, FLORIE

Frank X. Popeleski MS, GRI, CSI P O Box 2023 Valrico, FL 33595

My registration had lapsed and I sent in the reinstatement form today. Your office directed me to the site where I can incorporate here in Florida. Here are the forms. I hope all is in order.

Frank X Popeleski

schoonerfl@hotmail.com

813-215-8699

TRANSMITTAL LETTER

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

SUBJ	ECT:			
Enclo	sed is an ori	riginal and one (1) copy of the Certificate of Dom	nestication and a check for:	
<u>FEES</u>	<u>.</u>			
	Articles o	te of Domestication \$50.00 of Incorporation and Certified Copy domesticate and file \$128.75	<u>5</u>	
OPTIONAL:				
Certificate of Status		te of Status \$ 8.75	;	
		TRANK X, POPELES Name (printed or typed) 1422 MARSH WOOD		
		Address	_	
	_	Seffner, FL 335 City, State & Zip	-g 4	
	_	813-215-8699		
	_	Daytime Telephone Numbe	r	

CERTIFICATE OF DOMESTICATION

Th	e undersigned, Frank X, Vopielaski, President,	
	e undersigned, FRANT Sopielesty, President, (Name) (Title) Schoolier Properties, Free 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 MARCH 03, 2062.	
2.	The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was BILOXI, MISSISSI	
3.	The name of the corporation immediately prior to the filing of this Certificate of Domestication was Schoolen Properties, 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 Schooks12 Tropenties, Fr	c
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 Start & MISISIPPI, Secretary & Starte, Jackson, ms	
6.	Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.	
I a	m President, of Schoomen Properties, The	
ane	d am authorized to sign this Certificate of Domestication on behalf of the corporation and have done	
so	this the 17 day of JANUARY, 2007. Trans X Cureller (Authorized Signature)	
	Filing Fee: Certificate of Domestication Articles of Incorporation and Certified Copy Total to domesticate and file Filing Fee: \$50.00 \$78.75 FORTION STATE STATE	

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME
THE NAME OF THE CORPORATION SHALL BE: SCHOONER PROPERTIES, Frc.
ARTICLE II PRINCIPAL OFFICE
THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS: 1422 MAILING ADDRESS IS: 1422 MAILING ADDRESS IS:
C-00 - T1 22-PU
Seffner, FL 33584
ARTICLE III PURPOSE
THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED: REPLESTA Seivices,
SALES AND CONSULTING.
ARTICLE IV SHARES THE MARKET OF STANDARD
THE NUMBER OF SHARES OF STOCK IS: 100
25 Spr. 19 Spr
ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS
THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES: PROSI CLEST - TRANK XI VORE LESTI
1422 MARSA WOOD DIE
Seffner, FL 33584
THE NUMBER OF SHARES OF STOCK IS: 100 ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES: Prosident - TRANK X. Popeles hi 1422 MDRSh Wood DR Seffner, FL 33584
ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS
THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:
FRANK & Poraleshi
FRANK & Popeleshi' 1422 MARSH Wood DRIVE
Seffnen, FL 33584
ARTICLE VII INCORPORATOR
THE NAME AND ADDRESS OF THE INCORPORATOR IS: FRANK XIVOPE LEST TO
1977 WASH MOOR PLEASE
Collman, FL 33584
THE NAME AND ADDRESS OF THE INCORPORATOR IS: FRANK XI Popeher A. 1422 MARSH WOOD DRIVE Seffner, FL 33584

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,
Frand X tone (1)
Signature/Registered Agent Date
F 1/2 1/
Tran Homell'
Signature/Incorporator Date