

PD7000048021

(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



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04/17/07--01017--015 \*\*128.75

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07 MAR 17 PM 1:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9/H

# ActiveFilings

Business Formation Services  
18100 W. Dixie Hwy. Suite 202,  
Miami, FL 33160-2058  
Phone/Fax: 1-800-609-2521

## Transmittal Letter

Type of Request:  
☐ Expedited ☒ Normal

Date: Apr 13, 2007

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

Subject:  
**Symbiony Corporation**

### SUBMITTERS INFORMATION

Account #

Contact Person: Robert Neuberger / Stephanie Francis  
Phone number: 1-800-609-2521 x703 Fax number: 305-402-2248  
Email address: Operations@activefilings.com

### DOCUMENT FILING REQUEST INFORMATION

Company Name: Symbiony Corporation  
File Number  
Type of Filing: Certificate of Domestication Reservation #

### PAYMENT INFORMATION

Amount to pay: \$128.75  
Payment method: ☐ Credit Card ☒ Check

### FILING INSTRUCTIONS / COMMENTS

Encl.: Original and one copy of Certificate of Domestication, Articles of Incorporation, Consent of Registered Agent and check.

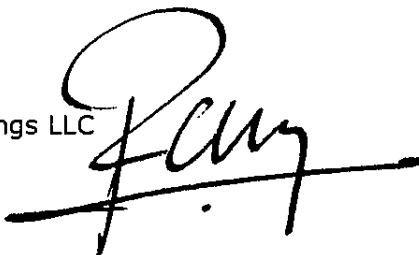
### METHOD OF RETURN

- ☐ Messenger / Pick up  
☐ Courier service: FedEx / DHL / UPS  
☒ Regular Mail (please use the pre-addressed envelope)

Account Nbr:

Sincerely,

Active Filings LLC



## TRANSMITTAL LETTER

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

**SUBJECT:** Symbiony Corporation

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:** Roberto Neuberger  
**Name (printed or typed)**

18100 W Dixie Hwy Suite 202  
**Address**

Miami, FL 33160  
**City, State & Zip**

305-792-0888  
**Daytime Telephone Number**

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**CERTIFICATE OF DOMESTICATION**

The undersigned, Santiago Carrillo, President  
(Name) (Title) **SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

of Symbiony Corporation a foreign corporation,  
(Corporation Name)

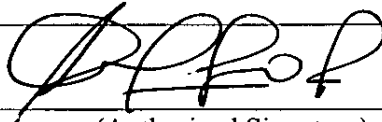
in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was June 6, 2002
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was State of Nevada
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Symbiony Corporation
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 Symbiony Corporation
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 Nevada
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am Santiago Carrillo, of Symbiony Corporation

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done

so this the 11th day of April, 2007



(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  
OF**

**SYMBIONY CORPORATION**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I:** The name of the corporation shall be **Symbiony Corporation**.

**ARTICLE II:** The principal place of business and mailing address is **1405 St. Gabrielle Ln, Weston, FL 33326**.

**ARTICLE III:** The purpose for which the corporation is organized is **Any and all lawful business**.

**ARTICLE IV:** The number of shares of stock is **2000**.

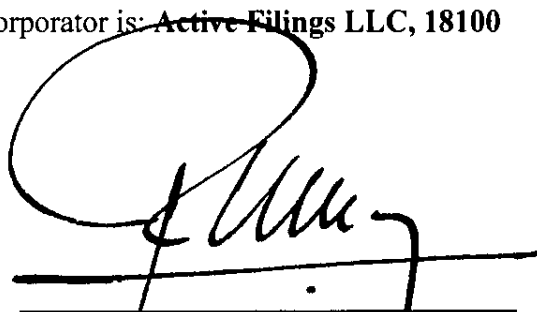
**ARTICLE V:** The initial officers and/or directors are:

**Title: Director, Santiago Carrillo, 1405 St. Gabrielle Ln, Weston, FL 33326.**

**Title: Director, Marcela Vega, 1405 St. Gabrielle Ln, Weston, FL 33326.**

**ARTICLE VI:** The name and Florida street address of the registered agent is: **Santiago Carrillo, 1405 St. Gabrielle Ln, Weston, FL 33326.**

**ARTICLE VII:** The name and address of the Incorporator is: **Active Filings LLC, 18100 W. Dixie Hwy, Suite 202, Miami, FL 33160**

  
\_\_\_\_\_  
**Roberto Neuberger,  
Managing Member  
for Active Filings LLC**

Dated: April 11, 2007

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Consent of Appointment by the Registered Agent

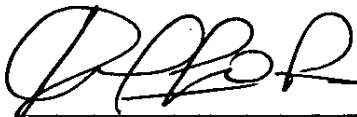
I, Santiago Carrillo resident of the state of Florida hereby give my consent to serve as the registered agent for

**Symbiony Corporation**

Having been named as registered agent and to accept service of process for the above stated corporation at 1405 St. Gabrielle Ln, Weston, FL 33326, county of Broward, I hereby accept the appointment as registered agent and agree to act in this capacity.

I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Dated Apr 11, 2007



Santiago Carrillo  
Registered Agent