

PD 7000120401

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

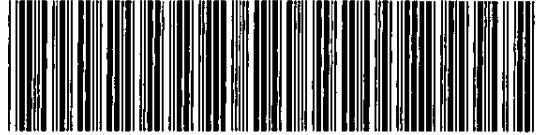
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200111305702

10/29/07--01033--001 **128.75

FILED

2007 NOV -5 A 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. WHITE NOV -6 2007

TRANSMITTAL LETTER

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

SUBJECT: Foreign Corporation to Domestic

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
-----------------------	---------

FROM: Lisa J Cozzi
Name (printed or typed)

1116 N. 13th Ave
Address

Hollywood FL 33019
City, State & Zip

Daytime Telephone Number



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 30, 2007

LISA J COZZI
1116 N 13TH AVE
HOLLYWOOD, FL 33019

SUBJECT: ATLANTIC SURETY CONSULTING CO., INC.
Ref. Number: W07000053723

We have received your document for ATLANTIC SURETY CONSULTING CO., INC. and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the date on which corporation was first formed. You listed the month and year only.

Please return the corrected 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) 245-6933.

Dale White
Regulatory Specialist II
New Filing Section

Letter Number: 707A00063568

CERTIFICATE OF DOMESTICATION

FILED

The undersigned, LISA J Cozzi, President,
(Name) (Title) 2007 NOV -5 A 8:47

of Atlantic Surety Consulting Co. Inc. a foreign corporation,
(Corporation Name) SECRETARY OF STATE
TALLAHASSEE, FLORIDA

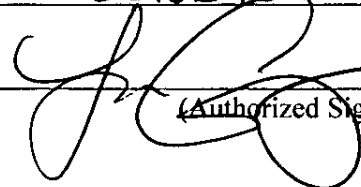
in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was 02/03/1997
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was New Jersey
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Atlantic Surety Consulting Co. 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 Atlantic Surety Consulting Co. 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 President
LISA COZZI, of Atlantic Surety Consulting Company INC.

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

so this the 24 day of October 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
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Atlantic Surety Consulting Co. Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

1116 N. 13th Avenue
Hollywood FL 33019

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

For Profit - Insurance Claims

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS:

100

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

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

LISA J Cozzi, President
1116 N. 13th Avenue, Hollywood, FL 33019

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

LISA J Cozzi
1116 N. 13th Ave Hollywood FL 33019

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

LISA J Cozzi
1116 N. 13th Ave
Hollywood FL 33019

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

10/24/07

Signature/Incorporator

Date

10/24/07

FILED
2007 NOV -5 A 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA