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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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Office Use Only

### TRANSMITTAL LETTER

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

Transfer of Alabama Incorporation to Florida **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** \$78.75 Total to domesticate and file \$128.75 **OPTIONAL: Certificate of Status** \$8.75 FROM: Lisa M. Porter Name (printed or typed) 174 WaterColor Way, #317 Address Santa Rosa Beach, Florida 32459 City, State & Zip 850-622-0353

**Daytime Telephone Number** 



# FLORIDA DEPARTMENT OF STATE Division of Corporations

November 15, 2007

LISA M. PORTER 214 BLUE MOUNTAIN ROAD UNIT #11 SANTA ROSA BEACH, FL 32459

SUBJECT: PORTER'S INC. Ref. Number: W07000056194



We have received your document for PORTER'S INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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

The document number of the name conflict is L06000023515 - PORTER LLC.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2008 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

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) 245-6934.

Loria Poole Regulatory Specialist II New Filing Section

Letter Number: 807A00065959

# CERTIFICATE OF DOMESTICATION

	CERTIFICATE OF D	OMESTICATIO	DAGE STATE	
Th	e undersigned, Lisa M. Porter	President	ing is	
	(Name)		(Title)	
of	Porter's Inc.		a foreign corporation.	
in :	(Corporation Name) accordance with s. 607.1801, Florida Statutes, does	hereby certify:		
1.	The date on which corporation was first formed wa	December 15	, <u>1999</u>	
2.	The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was State of Alabama			
3.	The name of the corporation immediately prior to the filing of this Certificate of Domestication was Porter's 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 Porter Services Inc.			
<b>5</b> .	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 Alabama			
6.	Attached are Florida articles of incorporation to complete the domestication requirements pursuan to s. 607.1801.			
I aı	n Lisa M. Porter , of Porter Services Inc.			
and	am authorized to sign this Certificate of Domestica	ation on behalf of th	e corporation and have done	
so	this the 4th day of December		, 2007	
	Loa M. Porto (Authorized Si	gnature)	·	

Filing Fee:

\$50.00

<u>\$78.75</u>

\$128.75

**Certificate of Domestication** Articles of Incorporation and Certified Copy Total to domesticate and file

#### ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

## ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE: Porter Services Inc.

#### ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS: 174 WaterColor Way, #317 Santa Rosa Beach, FL 32459

# ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED: To engage in all lawful business.

#### ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 1000 with par value of \$1 a share.

# ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

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

Lisa M. Porter - President - 174 WaterColor Way, #317, Santa Rosa Beach, Florida, 32459 James R. Porter - Vice President - 174 WaterColor Way, #317, Santa Rosa Beach, Florida, 32459

# 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 M. Porter 174 WaterColor Way, #317 Santa Rosa Beach, Florida 32459

#### ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Lisa M. Porter 174 WaterColor Way, #317 Santa Rosa Beach, Florida 32459

***************************************		
HAVING BEEN NAMED AS REGISTERED AGENT AND TO	ACCEPT SERVICE OF PROCESS FOR THE ABOVE	
STATED CORPORATION AT THE PLACE DESIGNATED II	THIS CERTIFICATE, I AM FAMILIAR WITH AND	
ACCEPT THE APPOINTMENT AS REGISTERED AGENT A	ND AGREE TO ACT IN THIS CAPACITY.	
Sim M. Horton	12/04/2007	
Signature/Registered Agent	Date	
Sirai M. Porter	12/04/2007	
Signature/Incorporator	Date	

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