

PD8000018870

(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



500118300775

02/21/08--01022--032 **137.50

FILED

2008 FEB 21 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: THOMAS ANTHONY & ASSOCIATES, 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 |
|-----------------------|----------------|

FROM: JOSEPH D. QUINONES
Name (printed or typed)

1110 DOUGLAS AVENUE, SUITE 1001
Address

ALTAMONTE SPRINGS, FL 32717
City, State & Zip

407-862-5300
Daytime Telephone Number

CERTIFICATE OF DOMESTICATION

FILED
2008 FEB 21 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, JOSEPH D. QUINONES, CEO-DIRECTOR
(Name) (Title)

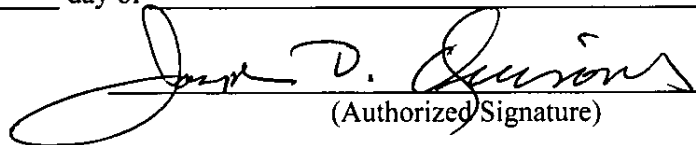
of THOMAS ANTHONY & ASSOCIATES, INC. a foreign corporation,
(Corporation Name)

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

1. The date on which corporation was first formed was AUGUST 7, 2006.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was NEW YORK.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was THOMAS ANTHONY & ASSOCIATES, 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 THOMAS ANTHONY & ASSOCIATES, 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.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am CEO-DIRECTOR, of THOMAS ANTHONY & ASSOCIATES, INC.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 20TH day of FEBRUARY, 2008.


(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.

FILED
2008 FEB 21 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:
THOMAS ANTHONY & ASSOCIATES, INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:
1110 DOUGLAS AVENUE, SUITE 1001
ALTAMONTE SPRINGS, FL 32714

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:
100,000 SHARES @ .001 COMMON STOCK
100,000 SHARES @ .001 PERFERRED STOCK

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

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

JOSEPH D. QUINONES, CEO-DIRECTOR
5834 DELTA STREET
ORLANDO, FL 32807

HARRY C. STONE II, DIRECTOR
561 WOODVIEW DRIVE
LONGWOOD, FL 32779

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

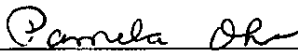
PAMELA OHAB
100 E. SYBELIA AVENUE
SUITE 130
MAITLAND, FL 32751

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

JOSEPH D. QUINONES
5834 DELTA STREET
ORLANDO, FL 32807

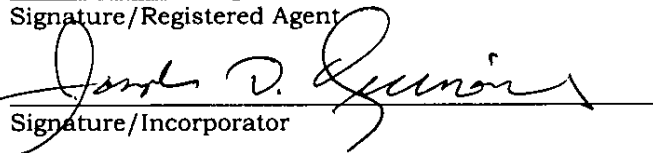
**HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR WITH AND
ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.**



Signature/Registered Agent

2/20/08

Date



Signature/Incorporator

2/20/08

Date