P08000037600

| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| | | |
| (Ac | ldress) | |
| | | |
| (Ac | ldress) | |
| | | |
| (Ci | ty/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| | | |
| (Bu | isiness Entity Nar | ne) |
| | | |
| (Do | cument Number) | |
| | | |
| Certified Copies | Certificates | of Status |
| | | |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |





900121664519

94/14/98--01818--008 **128.75

SECRETARY OF STATE

BM 4/14/08

TRANSMITTAL LETTER

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

| SUBJECT: Swanis Painting 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 \$78.75 Total to domesticate and file \$128.75 | | | | |
| OPTIONAL: | | | | |
| Certificate of Status \$ 8.75 | | | | |
| FROM: Larry Swann Name (printed or typed) 3448 S. Peninsola w). Address | | | | |
| Port Orange FL 32127 City, State & Zip | | | | |
| 386-316-2541 Daytime Telephone Number | | | | |

CERTIFICATE OF DOMESTICATION

| Th | e undersigned, harry Swann, Preside (Name) | at, |
|-------|--|------------------------|
| | (Name) (Title | |
| | Corporation Name) accordance with s. 607.1801, Florida Statutes, does hereby certify: | oreign corporation, |
| 111 6 | accordance with s. 607.1801, Florida Statutes, does nereby certify: | |
| 1. | The date on which corporation was first formed was | <u>, 2003</u> |
| 2. | The jurisdiction where the above named corporation was first formed, incorpo | rated, or otherwise |
| | came into being was State of Oeleware | .• |
| 3. | The name of the corporation immediately prior to the filing of this Certificate | |
| | was Swann's Painting | • |
| 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 Swanns Paint | ing Inc |
| | The jurisdiction that constituted the seat, siege social, or principal place of bus administration of the corporation, or any other equivalent jurisdiction under an immediately before the filing of the Certificate of Domestication was | oplicable law, |
| | Attached are Florida articles of incorporation to complete the domestication re to s. 607.1801. | equirements pursuant |
| I an | n President, of Swanis Painting Inc | |
| and | am authorized to sign this Certificate of Domestication on behalf of the corpor | ration and have done |
| | • | |
| | (Authorized Signature) | APR 14 PI ECRETAN O |
| | | FLOF |
| | Filing Fee: | ATE 55 |
| | 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.

| Δ | RTI | CI. | R I | N | AMI | P. |
|---|-----|-----|-----|---|-----|----|
| | | | | | | |

THE NAME OF THE CORPORATION SHALL BE:

Swands Painting Inc

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

3448 S. Peninsula Dr

Port orange, FL 32127

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Painting Service

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS:

1500

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

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

harry Swann-President

3448 S. Peninsula Dr

Port Drange, FL 32127

John Garofalo: Vice President 3448 S. Peninsula Or Port Orange, FL 32127

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

harry Swann 3448 S. Peninsula Wr

PORT Orange, FL 32127

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

harry Swann 3448 S. Peninsula Wr

Port orange, FL 32127

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 $oldsymbol{lpha}$ CCEPT THE $oldsymbol{\lambda}$ PPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

Signature/Registered Agent

Signature/Incorporator