# P10000004226

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(Bocument Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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SECRETARY OF STATE
ANASSEE FLORIDA

FILED .

## **COVER LETTER**

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

SUBJECT:	DOMESTICATION OF CORPORATION					
Enclosed is an or	iginal and one (1) copy of the Certificate of Domestication and a check for:					
FEES:						
Articles o	e of Domestication \$ 50.00 of Incorporation and Certified Copy \$ 78.75 lomesticate and file \$128.75					
OPTIONAL:						
Certificate	e of Status \$ 8.75					
	EYAL NAVE					
<del></del>	Name (printed or typed)					
	12555 ORANGE # 5020					
_	Address					
	DAVIE, FL 33330					
	City, State & Zip					
	954-703-2456					
_	Daytime Telephone Number					
_	info@ampluminc.com					
	E-mail address: (to be used for future annual report notification)					

# CERTIFICATE OF DOMESTICATION

The undersigned,	EYAL NAVE , VIC		E PRES,	
	(Name)	(Title)		
of	American Plumbing Service, Inc.	a foreig	n corporation,	
	(Corporation Name)			
in accordance with	n s. 607.1801, Florida Statutes, does hereby c	ertify:		
1. The date on w	nich corporation was first formed was	April 19	, <u>1994</u> .	
2. The jurisdictio	n where the above named corporation was fi	rst formed, incorporated	, or otherwise	
came into beir	ng was COLORADO		•	
3. The name of the	ne corporation immediately prior to the filing	of this Certificate of Do	omestication	
was Americai	n Plumbing Service, Inc.		•	
4. The name of the	ne corporation, as set forth in its articles of in	corporation, to be filed	pursuant to	
s. 607.0202 an	d 607.0401 with this certificate is AMPLUM	1 Services, Inc.		
6. Attached are F to s. 607.1801.	Plorida articles of incorporation to complete t	he domestication require	ements pursuant	
I am VICE PR	RES. , of American Plumbing Service,	, Inc.		
and am authorized	to sign this Certificate of Domestication on	behalf of the corporation	n and have done	
so this the 12			2010 .	
	(Authorized Signature)	<u>n</u>	SECRETARY (	
	Filing Fee: Certificate of Domestication	\$ 50.00	PH 2: 47 OF STATE FLORIDA	
	Articles of Incorporation and Certified			
	Total to domesticate and file	<b>\$128.75</b>		

### ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.



#### ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

10 JAN 14 PM 2: 47

AMPLUM SERVICES, INC.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS: 12555 ORANGE DRIVE, # 5020 DAVIE FL 33330

#### 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: 20,000

#### ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:
KEITH SELLERS 12555 ORANGE DRIVE # 5020, DAVIE FL 33330 - PRES
EYAL NAVE 12555 ORANGE DRIVE #5020 - , DAVIE FL 33330 - VP

#### ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS: EYAL NAVE 12555 ORANGE DRIVE #5020 - DAVIE FL 33330

#### ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:
EYAL NAVE 12555 ORANGE DRIVE #5050 - DAVIE FL 33330

*************	***********
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCES	PT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION AT THE PLACE DESIGNATED IN THIS	CERTIFICATE, I AM FAMILIAR WITH AND
ACCEPT THE APPOINTMENT AS RECUSTRED AGENT AND AGE	REE TO ACT IN THIS CAPACITY.
John Man	1/12-10
Signature/Registered Agent	Date

Signature/Incorporator

1 - 1 V - 16
Date