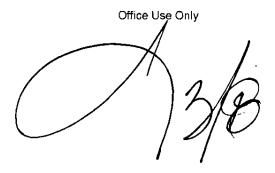
## P10000020477

(Requestor's Name)				
/A.J.J.				
(Addr	ess)			
(Address)				
(City/	State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
· (Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				
		•		





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03/05/10--01044--006 \*\*128.75

2010 MAR -5 PM 1: 33 SECRETARY OF STATE

## **COVER LETTER**

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

SUBJECT:	Certificate of Dumestication
Enclosed is an	original and one (1) copy of the Certificate of Domestication and a check for:
FEES:	
Articles	sate of Domestication \$ 50.00 s of Incorporation and Certified Copy \$ 78.75 o domesticate and file \$128.75
OPTIONAL:	
Certific	ate of Status \$ 8.75
	Name (printed or typed)
	Address
	City, State & Zip
	Daytime Telephone Number
	E-mail address: (to be used for future annual report notification)

## **CERTIFICATE OF DOMESTICATION**

<u></u>	The second second
for many	2 W
CERTIFICATE OF DOMESTICATION	THE C
The state of the s	The state of
The undersigned, John T. Mennenga, President (Name) (Title)	850, My
	oration 2
of Monnenga Associates Inc. a foreign corp (Corporation Name)	O'
in accordance with s. 607.1801, Florida Statutes, does hereby certify:	
1. The date on which corporation was first formed was <u>September 20</u> , <u>I</u>	994.
2. The jurisdiction where the above named corporation was first formed, incorporated, or of	therwise
came into being was New York	•
3. The name of the corporation immediately prior to the filing of this Certificate of Domesti	ication
was Mennenga Associates Inc.	
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursua	
s. 607.0202 and 607.0401 with this certificate is	<del></del>
Mennenga Associates Inc.	<del></del> •
5. The jurisdiction that constituted the seat, siege social, or principal place of business or ce administration of the corporation, or any other equivalent jurisdiction under applicable la immediately before the filing of the Certificate of Domestication was	
<ol> <li>Attached are Florida articles of incorporation to complete the domestication requirement to s. 607.1801.</li> </ol>	s pursuant
I am President, of Mannenga Associates Inc.	<del></del>
and am authorized to sign this Certificate of Domestication on behalf of the corporation and	have done
so this the $3$ day of $March 20/0$ ,	· ·
,	
(Authorized Signature)	
Filing Fee:	
Certificate of Domestication \$ 50.00	
Articles of Incorporation and Certified Copy \$\frac{\$78.75}{\$128.75}\$	

## **ARTICLES OF INCORPORATION**

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME  THE NAME OF THE CORPORATION SHALL BE: MEMORE	inga Associates In	<b>.</b>	
ARTICLE II PRINCIPAL OFFICE			
THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:	2183 Wisterias	<b>↓ →</b>	
	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	repl	
	Sarasota FL 34	-2.39	
ARTICLE III PURPOSE		·	
THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZ	ED: Consulting	FILED  2010 HAR -5 PM 1: 34  SECRETARY OF STATE TALLAHASSEE, FLORIDA	
	J	FILE D  2010 HAR -5 PM 1: 31  SECRETARY OF STATE ALLAHASSEE. FLORID	
		R TAN	
		SEC ON THE	
ARTICLE IV SHARES			
THE NUMBER OF SHARES OF STOCK IS: 200		ORA :	
ARTICLE V INITIAL DIRECTORS AND/ OR	<del></del>	,	
THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:	John T. Mennenya,	President	
ARTICLE VI INITIAL REGISTERED AG THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NO			
,	2183 Wisteria Street		
	Savarota, FL 34239		
	3 a v a 50 [a  - [	247224	
ARTICLE VII INCORPORATOR	1 1 10.4		
THE NAME AND ADDRESS OF THE INCORPORATOR IS: John T. Menning a 2183 Wisteria Street			
	Savasota, FL 342	39	
************	****	****	
HAVING BEEN NAMED AS REGISTERED AGENT AND TO	O ACCEPT SERVICE OF PROCES	S FOR THE ABOVE	
STATED CORPORATION AT THE PLACE DESIGNATED I			
ACCEPT THE APPOINTMENT AS REGISTERED AGENT A			
Signature/Registered Agent	3/3/2010 Date 3/3/2010		
Signature/Registered Agent ${\cal O}$	Date	<i>I</i>	
Of Manager	3/71	2010	
Signature/Incorporator	Date		