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(Re	equestor'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:				

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ZE JUN I U A II: 48



COVER LETTER

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

SUBJECT: _	ECT:EGERTON-WALLACE ASSOCIATES, INC.				
Enclosed is an o	original and one (1) cop	y of the Certificate of Domestication and a check for:			
FEES:					
Articles	te of Domestication of Incorporation and C domesticate and file	\$ 50.00 ertified Copy <u>\$ 78.75</u> \$128.75			
OPTIONAL:					
Certifica	te of Status	\$ 8.75			
-	Egerton-Wallace Associates, Inc. Name (printed or typed)				
•	95276 Village Drive Address				
	Fernandina Beach, FL 32034 City, State & Zip				
	(904) 432-8380 Daytime Telephone Number				
	cwsavory@aol.com E-mail address: (to be used for future annual report notification)				

CERTIFICATE OF DOMESTICATION

Th	e undersigned,	Wallace E. Savory ,	President ,			
		(Name)	(Title)			
		Egerton-Wallace Associates, Inc. (Corporation Name) 607.1801, Florida Statutes, does hereby				
			•			
1.	The date on which	corporation was first formed was	October 1,1969			
2.	-	here the above named corporation was fivas Massachusetts	rst formed, incorporated, or otherwise			
3.	The name of the corporation immediately prior to the filing of this Certificate of Domestication was Egerton-Wallace Associates, Inc.					
4.	The name of the co	orporation, as set forth in its articles of ir	corporation, to be filed pursuant to			
s. 607.0202 and 607.0401 with this certificate is <u>Egerton-Wallace Associates</u> , Inc.						
5.	administration of t	nat constituted the seat, siege social, or prothe corporation, or any other equivalent just the filing of the Certificate of Domestic	risdiction under applicable law,			
	to s. 607.1801.	da articles of incorporation to complete t	·			
La	m President	, of <u>Egerton-Wallace Associates</u>	, Inc.			
	d am authorized to s this the day o	sign this Certificate of Domestication on of Twee (Authorized Signature)				
	At	Filing Fee: ertificate of Domestication rticles of Incorporation and Certified (otal to domesticate and file	\$ 50.00 \$ 78.75 \$128.75			

INHS53 (8/05)

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Egerton-Wallace Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

95276 Village Drive Fernandina Beach, FL 32034

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Business Consulting



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:

Wallace E. Savory, Director/President/Treasurer/Secretary 95276 Village Drive

Fernandina Beach, FL 32034

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The Name and Florida street address (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Wallace E. Savory 95276 Village Drive Fernandina Beach, FL 32034

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

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.

Worldone Janes	1-7-2010
Signature/Registered Agent	Date
Worle. 4 Juney	6-7-2010
Signature/Incorporator	Date