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(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
<u> </u>		

Office Use Only



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SECRETARY OF STATE VALLAHASSEE, FLORIDA

2011 AUG -3 PM 4:

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COVER LETTER

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

SUBJECT: _	: Acton Arts, Inc.					
Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:						
FEES:						
Articles	te of Domestication \$ 50.00 of Incorporation and Certified Copy \$ 78.75 domesticate and file \$128.75					
OPTIONAL:						
Certifica	te of Status \$ 8.75					
-	Michael E. Steuer, CPA Name (printed or typed)					
	600 Bypass Dr, Ste 100 Address					
	Clearwater, Fl 33764 City, State & Zip					
	727-797-9000 Daytime Telephone Number					
mike@mikethecpa.com E-mail address: (to be used for future annual report notification)						

2011 AUG -3 PM 4

CERTIFICATE OF DOMESTICATION

						5		
Th	e undersigned,		· · · · · · · · · · · · · · · · · · ·	Preside	nt <u>설설</u>	- မ်		
		(Name)		(Title)	<u> </u>	PH		
of		Acton Arts, In	Ç.	a forei	gn corporation			
		(Corporation Name)			- 音点	ယ္တ		
in a	accordance with s.	607.1801, Florida Statute	s, does hereby	certify:		0,		
1.	The date on which	corporation was first for	med was	8/9	,			
2.	The jurisdiction w	e jurisdiction where the above named corporation was first formed, incorporated, or otherwise						
	came into being w	as State of Illinois				<u>.</u> •		
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication								
	was Acton Arts, I	nc.				_ •		
4.	The name of the co	orporation, as set forth in			d pursuant to			
	s 607 0202 and 60	07.0401 with this certification	uta is Acton A	te Inc	•			
	s. 007.0202 and 00	7.0401 With this certifica	ite is <u>Acton At</u>	(5, 1110.				
	-					· ·		
5.		ion that constituted the seat, siege social, or principal place of business or central on of the corporation, or any other equivalent jurisdiction under applicable law,						
					cable law,			
immediately before the filing of the Certificate of Domestication was State of Illinois						<i>'</i>		
_						_		
6.	to s. 607.1801.	da articles of incorporation	on to complete i	the domestication requi	rements pursua	ınt		
	10 3. 007.1001.				•			
I at	m <u>President</u>	, of Acton Arts, Inc	<u>. </u>			-		
anc	d am authorized to s	sign this Certificate of Do	mestication on	behalf of the corporati	on and have do	ne		
	this the <u>11</u> day		August					
.,0			1	,	·			
		Km /s	15	_				
	_	(Autho	rized Signature)				

Filing Fee:

Certificate of Domestication \$ 50.00
Articles of Incorporation and Certified Copy
Total to domesticate and file \$ 128.75

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Acton Arts, Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS: 1512 Maple St Clearwater, FI 33755

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED: Any and all legal business purposes

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 1000 Shares

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:
Kevin Acton
1512 Maple St
Clearwater, FI 33755

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:
Kevin Acton
1512 Maple St
Clearwater, FI 33755

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:
Kevin Acton
1512 Maple St
Clearwater, FI 33755

Signature/Registered Agent/Incorporator

8/1/11

Date