

P11000082005

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

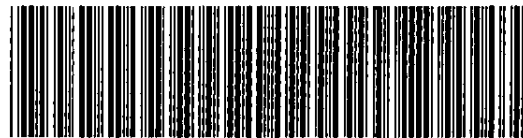
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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09/06/11--01024--009 **137.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 SEP 15 AM 10:12

W 11-46119

Bm 9/19/11

COVER LETTER

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

SUBJECT: DOMESTICATION OF IBP SOLUTIONS INC (DE CORP)

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

IBP SOLUTIONS INC.

Name (printed or typed)

1965 FRUITRIDGE ST

Address

BRANDON FL 33510

City, State & Zip

302 377 4998

Daytime Telephone Number

sss9opa1@yahoo.com

E-mail address: (to be used for future annual report notification)



RECEIVED

11 SEP 15 AM 11:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 7, 2011

IBP SOLUTIONS INC.
1965 FRUITRIDGE ST
BRANDON, FL 33510

SUBJECT: IBP SOLUTIONS INC.
Ref. Number: W11000046119

We have received your document for IBP SOLUTIONS INC. and your check(s) totaling \$137.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Becky McKnight
Regulatory Specialist II Supervisor
New Filing Section

Letter Number: 711A00020685

CERTIFICATE OF DOMESTICATION

The undersigned, VENUGOPAL CHIDARALA, PRESIDENT,
(Name) (Title)

of IBP SOLUTIONS INC. a foreign corporation,
(Corporation Name)

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was 9/29/1999.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was DELAWARE.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was IBP SOLUTIONS INC..
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 IBP SOLUTIONS INC..
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was DELAWARE.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am VENUGOPAL CHIDARALA, of _____

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done

so this the 9 day of Sept 2011.

Chidara

(Authorized Signature)

Filing Fee:	
Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 SEP 15 AM 10:13

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 SEP 15 AM 10:13

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

IBP SOLUTIONS INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

1965 FRUITRIDGE ST
BRANDON FL 33510

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

IT SERVICES

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:

VENUGOPAL CHIDARALA (PRESIDENT)
1965 FRUITRIDGE ST
BRANDON, FL 33510

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

VENUGOPAL CHIDARALA
1965 FRUITRIDGE ST
BRANDON, FL 33510

ARTICLE VII INCORPORATOR

THE **NAME AND ADDRESS** OF THE INCORPORATOR IS:

VENUGOPAL CHIDARALA
1965 FRUITRIDGE ST
BRANDON FL 33510

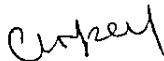
**HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR WITH AND
ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.**



Signature/Registered Agent

9/2/11

Date



Signature/Incorporator

9/13/11

Date