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(Requestor's Name)

(Address)

(Address)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: THE WOODMONT GROUP, INC.

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
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THE WOODMONT GROUP, INC.

Name (printed or typed)

3655 BOCA CIEGA DRIVE, UNIT 306

Address

NAPLES, FLORIDA 34112

City, State & Zip

(203) 521-7877

Daytime Telephone Number

audrey@thewoodmontgroup.com

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

CERTIFICATE OF DOMESTICATION

The undersigned, AUDREY A. POWERS, PRESIDENT/DIRECTOR,
(Name) (Title)

of THE WOODMONT GROUP, 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 MARCH 14TH
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was CONNECTICUT
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was THE WOODMONT GROUP, 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 THE WOODMONT GROUP, 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 CONNECTICUT
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am Audrey A. Powers, of 3655 BOCA CIEGA DRIVE, UNIT 306

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 23rd day of JANUARY, 2012.

Audrey Powers

(Authorized Signature)

Filing Fee:

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

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TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

THE WOODMONT GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

3655 BOCA CIEGA DRIVE, UNIT 306 NAPLES, FLORIDA 34112

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:
PLACEMENT AGENCY

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS:

100

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

AUDREY A. POWERS

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

AUDREY A. POWERS

3655 BOCA CIEGA DRIVE, UNIT 306

NAPLES, FLORIDA 34112

ARTICLE VII INCORPORATOR

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

AUDREY A. POWERS

3655 BOCA CIEGA DRIVE, UNIT 306

NAPLES, FLORIDA 34112

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.

① Audrey Powers
Signature/Registered Agent

1-23-2012

Date

② Audrey Powers
Signature/Incorporator

1-23-2012

Date

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TALLAHASSEE, FLORIDA