

P12 000016166

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 FEB 15 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Bureau Feb 1 2 2012

COVER LETTER

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

SUBJECT: CHANGE ENTITY TYPE

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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ATL INTERNATIONAL INC

Name (printed or typed)

BOX 204, 16057 TAMPA PALMS BLVD. WEST

Address

TAMPA, FL 33647-2001

City, State & Zip

813-973-8765

Daytime Telephone Number

ATLINC@ATLINTERNATIONALCORP.COM

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
12 FEB 15 PM 3:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

January 23, 2012

TODD LECUYER
BOX 204
16057 TAMPA PALMS BLVD WEST
TAMPA, FL 33647-2001

SUBJECT: ATL INTERNATIONAL INC.
Ref. Number: W12000004089

We have received your document for ATL INTERNATIONAL INC. and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

The registered agent must sign accepting the designation.

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) 245-6928.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 712A00001556


CERTIFICATE OF DOMESTICATION

The undersigned, TODD LECUYER, PRESIDENT
(Name) (Title)
of ATL INTERNATIONAL 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 JANUARY 02, 2008.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was NEW YORK.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was ATL INTERNATIONAL 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 ATL INTERNATIONAL 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 NEW YORK.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am PRESIDENT, of ATL INTERNATIONAL INC.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 02 day of JANUARY, 2012.


(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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ATL INTERNATIONAL, INC.

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

ATX1

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:
ATL INTERNATIONAL, INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:
16057 TAMPA PALMS BLVD. WEST
204
TAMPA, FL 33647 US

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:
TO ENGAGE IN THE WHOLESALE MERCHANDISE BUSINESS

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 200

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:
TODD LECUYER - PRESIDENT
16057 TAMPA PALMS BLVD. WEST 204
TAMPA, FL 33647

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:
LECUYER, TODD
16057 TAMPA PALMS BLVD. WEST 204
TAMPA, FL 33647 US

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:
LECUYER, TODD
16057 TAMPA PALMS BLVD. WEST 204
TAMPA, FL 33647 US

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.

X

Signature/Registered Agent

X 2-8-12

Date

X

Signature/Incorporator

X 2-8-12

Date

FILED
12 FEB 15 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200