

P/2000036083

(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 _____

Special Instructions to Filing Officer:

CORRECTED "PRINCIPAL
OFFICE ADDRESS" PER
TELEPHONE CONVERSATION
WITH AL BURKHARDT
K 04/17/12

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 04/17/12

COVER LETTER

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

SUBJECT: DOMESTICATION OF WINDOW VOGUES INC
#F07000003919

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

WINDOW VOGUES INC
Name (printed or typed)

PO Box 274
Address

DEERFIELD BEACH FL 33443
City, State & Zip

561 702 1881
Daytime Telephone Number

MA092085@aol.com
E-mail address: (to be used for future annual report notification)

CERTIFICATE OF DOMESTICATION

The undersigned, AL BURKHARDT, PRES
(Name) (Title)

of WINDOW VOGUES 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 DEC 31, 1971.
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 WINDOW VOGUES 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 WINDOW VOGUES 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 WINDOW VOGUES INC

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

so this the 31 day of MARCH, 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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TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

WINDOW VOGUES INC

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

948 GREENBRIAR DRIVE
BOYNTON BEACH FL 33435

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS:

ONE THOUSAND TWO HUNDRED FIFTY (1,250) SHARES

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

AL BURKHARDT, PRES
PO BOX 274
DEERFIELD BEACH FL 33443

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

AL BURKHARDT
948 GREENBRIAR DRIVE
BOYNTON BEACH FL 33435

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

AL BURKHARDT
PO BOX 274
BOYNTON BEACH FL 33443

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

Date

3/31/12

Signature/Incorporator

Date

3/31/12

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TALLAHASSEE, FLORIDA