

P120000046970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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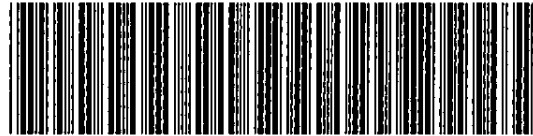
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 MAY 17 PM 4:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
5/21/12

COVER LETTER

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

SUBJECT: Certificate of Domestication

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

Pamela J. Colburne

Name (printed or typed)

9022 midnight Pass Road, Apt. 3

Address

Sarasota, FL 34242

City, State & Zip

(617) 314-9007

Daytime Telephone Number

pamela@colburneassociates.com

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

CERTIFICATE OF DOMESTICATION

The undersigned, Pamela J. Colburne, President,
(Name) (Title)
of Colburne Associates, 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 May 17, 2006.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Commonwealth of Virginia.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Colburne Associates, 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 Colburne Associates, 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 Commonwealth of Virginia.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am Pamela J. Colburne, of Colburne Associates, Inc.
President
and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 14 day of May, 2012.

Pamela J. Colburne
(Authorized Signature)

Filing Fee:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
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ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE: COLBURN ASSOCIATES, INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS: 9022 midnight Pass Rd.
Apartment 3
Sarasota, FL 34242

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Recruitment Services

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 5000

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

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

Pamela J. Colburne, President

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Pamela J. Colburne
9022 Midnight Pass Road, Apt. 3, Sarasota, FL 34242

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Pamela J. Colburne
9022 Midnight Pass Road, Apt 3, Sarasota, FL 34242

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.

Pamela J. Colburne
Signature/Registered Agent

5/14/12
Date

Pamela J. Colburne
Signature/Incorporator

5/14/12
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA