

P12000093807

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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11/09/12--01004--030 **128.75

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12 NOV -9 AM 11:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
11/13/12

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
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PETER SOBEL

Name (printed or typed)

9129 PUMPKIN RIDGE

Address

PORT ST. LUCIE, FL 34986

City, State & Zip

772-468-2180

Daytime Telephone Number

PS@VALUEADDEDGROUP.COM

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

CERTIFICATE OF DOMESTICATION

The undersigned, PETER SOBEL, PRESIDENT,
(Name) (Title)

of VALUE ADDED 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 AUGUST 12, 2004.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was STATE OF NEW YORK.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was VALUE ADDED 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 VALUE ADDED 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 STATE OF NEW YORK.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am PRESIDENT, of VALUE ADDED GROUP INC.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 6TH day of NOVEMBER, 2012.

Peter Sobel
(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

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

FILED
12 NOV -9 AM 11:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

VALUE ADDED GROUP INC

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

9129 PUMPKIN RIDGE
PORT ST LUCIE, FL 34986

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:
SALE AND INSTALLATION OF COMMERCIAL GOODS

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS:
20 SHARES

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

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

PETER SOBEL, PRES, 9129 PUMPKIN RIDGE, PORT ST LUCIE, FL 34986
ILENE SOBEL, SECTY, 9129 PUMPKIN RIDGE, PORT ST LUCIE, FL 34986

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:
PETER SOBEL, 9129 PUMPKIN RIDGE, PORT ST LUCIE, FL 34986

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

PETER SOBEL, 9129 PUMPKIN RIDGE, PORT ST LUCIE, FL 34986


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

NOV. 6, 2012

Date



Signature/Incorporator

NOV. 6, 2012

Date