

P14000006352

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

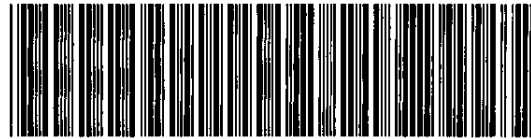
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF SUPERIOR COURT
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MD 1/23

COVER LETTER

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

SUBJECT: KARI SAMPSON AND ASSOCIATES 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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Lisa Zahorian

Name (printed or typed)

28089 Vanderbilt Dr., Suite 201

Address

Bonita Springs, FL 34134

City, State & Zip

239-405-8395

Daytime Telephone Number

lisa@wondertax.com

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

CERTIFICATE OF DOMESTICATION

The undersigned, Kari Sampson, President,
(Name) (Title)


of Kari Sampson and 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 December 11, 2000
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Houston, TX
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Kari Sampson and 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 Kari Sampson and 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 Houston, Texas
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am Kari Sampson, of Kari Sampson and Associates, Inc.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 8th day of January, 2014


(Authorized Signature)

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

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

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Kari Sampson and Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

Principal Address

4106 Bayhead Dr, Unit 101

Bonita Springs, FL 34134

Mailing Address

4106 Bayhead Dr, Unit 101

Bonita Springs, FL 34134

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: 1000

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

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

Title/Name

President, Kari Sampson

4106 Bayhead Dr, Unit 101

Bonita Springs, FL 34134

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Tax & Financial Strategists, LLC
28089 Vanderbilt Dr., Suite 201
Bonita Springs, FL 34134

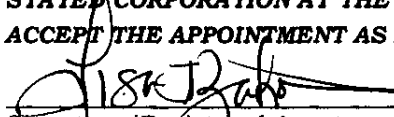
ARTICLE VII INCORPORATOR

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

Kari Sampson
4106 Bayhead Dr, Unit 101
Bonita Springs, FL 34134

FILED
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AT AMARSEEE FLORIDA

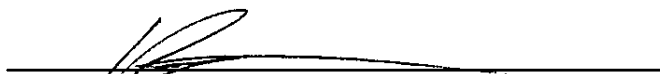
**HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR WITH AND
ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.**



Signature/Registered Agent

1-8-14

Date



Signature/Incorporator

1-8-14

Date