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(Re	equestor's Name)	<del></del>			
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(Cit	ty/State/Zip/Phone	<del>·</del> #)			
PICK-UP	☐ WAIT	MAIL			
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#### **COVER LETTER**

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

SUBJECT:
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  LINXSOFI  Name (printed or typed)
2500 NW 7-9 AVE Juite 24
Address  ORAL PL 37/22  City, State & Zip
Daytime Telephone Number
E-mail address: (to be used for future annual report notification)

## CERTIFICATE OF DOMESTICATION CRETARY OF STATE AND NOTICE CORPORATE A

The	undersigned, Salvador Bloch	President FEB   8 AM 3:   1						
	(Name)	(Title)						
of	Linxsoft, Inc.	a foreign corporation,						
in a	(Corporation Name) accordance with s. 607.1801, Florida Statutes, does hereby							
1.	The date on which corporation was first formed was 05/11/1999							
2.	The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was California							
3.	The name of the corporation immediately prior to the filinwas Linxsoft, Inc.	ng of this Certificate of Domestication						
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 Linxsoft, 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 California							
6.	Attached are Florida articles of incorporation to complete to s. 607.1801.	the domestication requirements pursuant						
I ar	Salvador Bloch , of Linxsoft, Inc.							
	am authorized to sign this Certificate of Domestication o	n behalf of the corporation and have done , 2014						
	(Authorized Signatur	e)						
	Filing Fee: Certificate of Domestication	\$ 50.00						
	Articles of Incorporation and Certified  Total to domesticate and file	-						

#### **ARTICLES OF INCORPORATION**

ARTICLE I NAME

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S. SICHETARY OF STATE
SIVISION OF CORPORATION

THE NAME OF THE CORPORATION SHALL BE:	2014 FEB   8 AM 3:
Linxsoft, Inc.	
ARTICLE II PRINCIPAL OFFICE	
THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRE	
Principal Address 2500 NW 79th Avenue	Mailing Address 2500 NW 79th Avenue
Suite 246	Suite 246
Doral, FL 33122	Dora, FL 33122
ARTICLE III PURPOSE THE PURPOSE FOR WHICH THE CORPORATION IS OR Software Developemnt and	
THE PURPOSE FOR WHICH THE CORPORATION IS OR	
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### THE NUMBER OF SHARES OF STOCK IS: 100 ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES: Title/Name Title/Name Salvador Bloch , President 10241 NW 52 Ter Doral, FL 33178 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: Salvador Bloch Oral, FL 33178 ARTICLE VII INCORPORATOR THE NAME AND ADDRESS OF THE INCORPORATOR IS: Salvador Bloch 10241 NW 52 Ter

Doral, FI 33178

*****	*****	****	*****	*****	*****	*****
HAVING BEEN NAMED STATED CORPORATION	Y //	/				
ACCEPT THE APPOINT					•	
Simple (Building		)			2/1	0/2014
Signature/Registered	Agent				Date 2 / /	0/2/4
Signature/Incorporate					Date	