

P14000025043

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

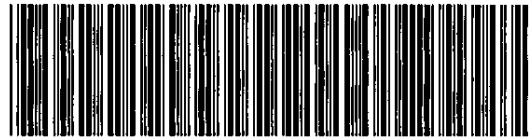
(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
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COVER LETTER

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

SUBJECT: Articles of Domestication w/ Articles of 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 |
|-----------------------|---------|

SmallBiZ.com

Name (printed or typed)

PO Box 13092

Address

Tucson, AZ 85732

City, State & Zip

520-881-3989

Daytime Telephone Number

mbanner@smallbiz.com

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

CERTIFICATE OF DOMESTICATION

The undersigned, Thomas Braun, President,
(Name) (Title)

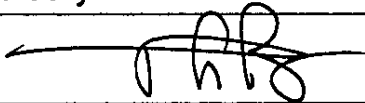
of GoldenGuard Financial, Inc. a foreign corporation,
(Corporation Name)

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was November, 17, 2006.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Texas.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was GoldenGuard Financial, 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 GoldenGuard Financial, 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 Texas.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am President, of GoldenGuard Financial, Inc.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 21st day of February, 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 |

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

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

GoldenGuard Financial, Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

Mailing Address

215 Sandal Lane

215 Sandal Lane

Palm Beach Shores, FL 33404

Palm Beach Shores, FL 33404

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Sale of insurance products

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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

Director/Thomas Braun

215 Sandal Lane

Palm Beach Shores, FL 33404

Title/Name

Director/Maryse Braun

215 Sandal Lane

Palm Beach Shores, FL 33404

Title/Name

President/Thomas Braun

215 Sandal Lane

Palm Beach Shores, FL 33404

Title/Name

Secretary/Maryse Braun

215 Sandal Lane

Palm Beach Shores, FL 33404

Title/Name

Title/Name

Title/Name

Title/Name

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ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Smallbiz Agents, LLC

75 N. Woodward Ave. #10000

Tallahassee, FF 32313

ARTICLE VII INCORPORATOR

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

Thomas Braun

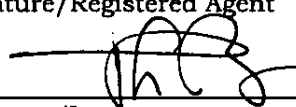
215 Sandal Lane

Palm Beach Shores, FL 33404

**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

3/5/14
Date


Signature/Incorporator

3/5/14
Date

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