# 7/400004627/

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



700260369327

05/23/14--01024--027 \*\*128.75

SECRETARY OF STATE

FILED

1 05/28/14

#### **COVER LETTER**

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

SUBJECT: DONESTICATION OF CORPORATION

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
BRIAN A. Smith
Name (printed or typed)
138 Scottsbale DR. Address
Address
MARY ESTHER FL 32569  City, State & Zip
City, State & Zip
850 - 461 - 9400 Daytime Telephone Number
Daytime Telephone Number
HOME ONE Solutions @ GMAIL: COM
E-mail address: (to be used for future annual report notification)

CERTIFICATE OF DOMESTICATION									
The	undersigned,	BRIAN	A. Smi	th,	DiREC	ctor/	Presi	DEA	<u>st</u> ,
of_	Home ?	Corporat h s. 607.1801, 1	itions,	INC.		a for			
1. 7	The date on w	hich corporation	n was first forn	ned was	/ ۱۱ م	2013	,		·
2.	The jurisdiction	on where the abing was $N_1$	ove named corp						
		he corporation			•	tificate of	`Domes	ticatio	on 
		he corporation, nd 607.0401 wi					_		
a	ıdministratior	on that constitute of the corpora perfore the filing	tion, or any oth	er equivalent j	urisdiction i				·
	Attached are I o s. 607.1801	Florida articles	of incorporation	to complete	the domestic	cation requ	uiremen	its pui	rsuant
I am	BRIANA.	Smith of	Home ?	DHE So	lution	S,IN	۷.		
and	am authorized	d to sign this Co day of	ertificate of Dor	nestication on	behalf of th	e corpora	tion and	d have	
INIUS.	252 (12/12)	Articles of I	Fi of Domestication ncorporation a nesticate and fi	and Certified	Сору	\$ 50.00 <u>\$ 78.75</u> \$128.75	SECRETARY OF STAT	14 HAY 23 PH 1:	FILED
INH	553 (12/12)						<u>=</u> ; =:	••	

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

THE NAME OF THE CORPORATION SHALL BE:	
HOME ONE Solutions,	INC.
ARTICLE II PRINCIPAL OFFICE THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS: Principal Address  138 Scotts Dale Dr.	Mailing Address
Mary Esther, FL. 32569	
ARTICLE III PURPOSE THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED THE CORPORATION IS ORGANIZED THE CORPORATION SHALL ENGREE MANAGEMENT, REMODELING, HOWE	

14 MAY 23 PH 1: 25

	14	
	MAY	
	23	[ [
	Z	1
SECRETARY OF STATE	1: 25	

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	Title/Name
PRESIDENT/BRIAN A-Smith	VICE PRESIDENT/LYNDA J. Smit
138 Scotts DALE DR	138 ScottsDale DR
MARY ESTHER, FL 32569	MARY ESTHER FL. 32569
Title/Name	Title/Name
SECRETARY /TREASURER	Director/Lynsa J. Smith
BRINIA. Smith	138 SouthSMLE DR.
138 Scotts DALE DR. MARY EST LER, FL. 32569	Mary Esther FL. 32569
Title/Name	Title/Name
DIRECTOR / BRIAN A. Smith	
138 Scottspace DR.	
Mysy Esther FL 32569	
Title/Name	Title/Name
	· · · · · · · · · · · · · · · · · · ·

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX N	OT ACCEPTABLE) OF THE REGISTERED AGENT IS:
BRIAN A. Smith	
138 Scotts DALE DR	
MARY ESTHER, FL 32569	
ARTICLE VII INCORPORATOR THE NAME AND ADDRESS OF THE INCORPORATOR IS:	F NAY SEGRETA NALLARA
BRIAN A. SMITH	FILE MY 23 MSSEE,
138 Scottsbale DR	
MARY ESTHER, FL. 32569	I: 25 FIDA
*************	*********
HAVING BEEN NAMED AS REGISTERED AGENT AND T STATED CORPORATION AT THE PLACE DESIGNATED	
ACCEPT THE APPOINTMENT AS REGISTERED AGENT	•
Board A Sult	5-14-2014
Signature/Registered Agent	Date
Boat A All	5-14-2014
Signature/Incorporator	Date

INITIAL REGISTERED AGENT AND STREET ADDRESS