

P14000088924

(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:



500264886895

10/15/14--01004--023 **137.50

FILED
14 OCT 31 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office Use Only

W14CW 63360

10-31-14
msw

COVER LETTER

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

SUBJECT: _____

Admiral Services 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
-----------------------	---------

Linda Turner

Name (printed or typed)

144 Triple Diamond Blvd Unit E

Address

North Venice FL 34275

City, State & Zip

941-488-1330

Daytime Telephone Number

Linda@AdmiralServices.com

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

RECEIVED
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

14 OCT 31 PM 1:01

CERTIFICATE OF DOMESTICATION

The undersigned, Linda Turner, V.P.
 (Name) (Title)

of Adnil Services 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 6/6 2005.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Maine.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Adnil Services 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 Adnil Services
We are a Foreign Corp Now In Florida
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 IL.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am Linda Turner, of Adnil Service
 and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done
 so this the 10 day of August 2014, 2014

Linda Turner
 (Authorized Signature)

Filing Fee:

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

FILED
 14 OCT 31 PM 1:01
 CLERK OF STATE
 TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Adnil Services INC**ARTICLE II PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

Mailing Address

144 Triple Diamond Blvd144 Triple Diamond BlvdUnit EUnit ENorth Venice 34275North Venice FL 34275**ARTICLE III PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Any and all lawful business

14 OCT 31 PM 1:01
CLERK OF STATE
TALLAHASSEE FLORIDA

FILED

FILED
14 OCT 31 PM 1:01
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES
THE NUMBER OF SHARES OF STOCK IS: 100

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS
THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Name	Title/Name
Dennis Turner	Linda Turner
President	V.P.

Name	Title/Name
Dennis Turner	Linda Turner
Treas	Sec

Name	Title/Name

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:

Linda Turner
144 Triple Diamond Blvd Unit E
North Venice FL 34275

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Linda Turner
144 Triple Diamond Blvd Unit E
North Venice FL 34275

FILED
14 OCT 31 PM 1:01
CLERK OF STATE
TALLAHASSEE, FLORIDA

**HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
NAMED 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.**

Linda Turner
Signature/Registered Agent

10/10/14
Date

Linda Turner
Signature/Incorporator

10/10/14
Date