

P14000096043

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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11/25/14--01012--016 **128.75

14 NOV 25 AM 7:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVAL
AND
FILED

1/H

COVER LETTER

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

SUBJECT: Comsworld, Inc: Certificate of Domestication

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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Name (printed or typed)

Address

City, State & Zip

Daytime Telephone Number

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

APPROVED
AND
FILED

CERTIFICATE OF DOMESTICATION 14 NOV 25 AM 7:30

The undersigned, Michael Ackerman, President
(Name) (Title)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA


of Comsworld, Inc
(Corporation Name) a foreign corporation,

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

1. The date on which corporation was first formed was October 17, 2002.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Georgia.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Comsworld, 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 Comsworld, 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 4097 Tritt Homestead Dr., Marietta, GA 30062.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am President, of Comsworld, Inc

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 30 day of September, 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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AND
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ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

14 NOV 25 AM 7:30

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Comsworld, Inc

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

Mailing Address

6781 Danah Ct.

P.O. Box 6988

Fort Myers, FL 33908

200 Carolina Ave.

Fort Myers Beach, FL 33931

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

The purpose of this corporation is to engage in any lawful
act or activity for which a corporation may be organized
under the general corporation law of Florida other than the
banking business, the trust company business, or the
practice of a profession permitted to be incorporated by
the Florida corporation code.

APPROVED
AND
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14 NOV 25 AM 7:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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/Michael Ackerman

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

APPROVED
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FILED

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ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS SECRETARY OF STATE
FLORIDA
THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Michael Ackerman

6781 Danah St

Fort Myers, FL 33908

ARTICLE VII INCORPORATOR
THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Michael Ackerman

6781 Danah St

Fort Myers, FL 33908

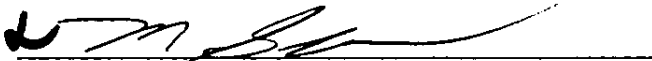
*HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR WITH AND
ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.*



Signature/Registered Agent

09/30/14

Date



Signature/Incorporator

09/30/14

Date