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| Special Instructions to F | iling Officer: | | | |
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Office Use Only



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15 MAR - 5 PM I2: 12





COVER LETTER

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

SUBJECT:

ECELL GLOBAL INC - DOMESTICATION

Document # F 12000004123

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

ECELL GLOBAL INC

Name (printed or typed)

1020 SUNSHINE LANE # 114

Address

ALTAMONTE SPRINGS, FL 32714

City, State & Zip

407-682-3422

Daytime Telephone Number

TAVILA@FORPROSER.COM

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

ALED ALED

CERTIFICATE OF DOMESTICATION

15 MAR -5 PM 12: 12

| Th | e undersigned, CEM C | ELIKKOL | | , PRESID | ENT | ///// -5 | PM 12: 13 |
|---|---|-----------------------|-------|---|-------------|--------------------------|-------------|
| | <u> </u> | (Name) | | · · · · · · · · · · · · · · · · · · · | (Title) | SECHETARY FALLAHASSER | OF STATE |
| of | ECELL GLOBAL II | | # | F12000004123 | a forc | eign corporation | on, |
| (Corporation Name) in accordance with s. 607.1801, Florida Statutes, does hereby certify: | | | | | | | |
| 1. | The date on which corp | poration was first fo | rme | d was 03/10/2014 | · | , | ~· |
| 2. | The jurisdiction where came into being was | | orpo | ration was first formed, | incorporat | ted, or otherw | ise |
| 3. | The name of the corpor was ECELL GLOB | | prior | to the filing of this Cer | tificate of | Domesticatio | n · |
| 4. | The name of the corpores. 607.0202 and 607.04 | · · | | articles of incorporation is ECELL GLOBAL | | ed pursuant to | - • |
| 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 FLORIDA | | | | | | |
| 6. | Attached are Florida ar to s. 607.1801. | ticles of incorporati | ion t | o complete the domestic | cation requ | irements purs | uant |
| I am PRESIDENT , of ECELL GLOBAL INC | | | | | | | |
| | d am authorized to sign this the 26 day of F | | ome | estication on behalf of th | ne corporat | ion and have | done _ · |
| | X | (Auth | orize | ed Signature) | | | |

Filing Fee:

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



ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

15 MAR -5 PM 12: 12

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

SECRETARY OF STATE TALL PHASSEE, FLORIDA

| ECELL GLOBAL INC | |
|--|----------------------|
| ARTICLE II PRINCIPAL OFFICE THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS: Principal Address 1020 SUNSHINE LANE # 1104 | Mailing Address SAME |
| | |
| ALTAMONTE SPRINGS | |
| FL 32714 | |
| | |
| | |
| ARTICLE III PURPOSE THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZA ANY LAWFUL PURPOSES | ED: |
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| | Low Later department |
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ARTICLE IV SHARES THE NUMBER OF SHARES OF STOCK IS: 5000

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES: Title/Name Title/Name **PRESIDENT CEM CELIKKOL** Title/Name Title/Name Title/Name Title/Name Title/Name Title/Name



15 MAR -5 PM 12: 12

| ARTICLE VI INITIAL REGISTERED | AGENT AND STREET ADDRESS OF STATE |
|--|---|
| THE NAME AND FLORIDA STREET ADDRESS (P.O. BO | OX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS: |
| DOUGLAS WHITE | |
| 1020 SUNSHINE LANE # 1104 | |
| ALTAMONTE SPRINGS, FL 32714 | |
| ARTICLE VII INCORPORATOR THE NAME AND ADDRESS OF THE INCORPORATOR IS: CEM CELIKKOL | |
| 1020 SUNSHINE LANE # 1104 | |
| ALTAMONTE SPRINGS, FL 32714 | |
| | VID TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE SED IN THIS CERTIFICATE, I AM FAMILIAR WITH AND CHT AND AGREE TO ACT IN THIS CAPACITY. Date |
| | 1/ |