

P15000029/93

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

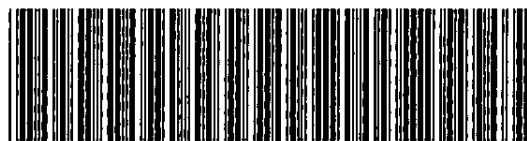
(Document Number)

Certified Copies

Certificates of Status

Special Instructions to Filing Officer:

Office Use Only



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12/26/13--01017--024 **128.75

FILED
15 MAR 27 AM 11:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 31 2015

S. GILBERT

N/4-477



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 3, 2014

ASSETS, LIABILITIES, & EQUITY SOLUTIONS INC
2985 44TH AVENUE NORTH
ST. PETERSBURG, FL 33714

SUBJECT: ASSETS, LIABILITIES, & EQUITY SOLUTIONS, INC.
Ref. Number: W1400000477

We have received your document for ASSETS, LIABILITIES, & EQUITY SOLUTIONS, INC. and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Before we can file your Certificate of Domestication, first you must file articles of withdrawal. We are enclosing forms for your convenience, or you may file withdrawal online.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Sylvia Gilbert
Regulatory Specialist II
New Filing Section

Letter Number: 714A00000185

COVER LETTER

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

SUBJECT: Assets, Liabilities, & Equity Solutions 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

Assets, Liabilities, & Equity Solutions Inc
Name (printed or typed)

2985 44th Ave N.
Address

St. Petersburg, FL 33714
City, State & Zip

727-525-6390
Daytime Telephone Number

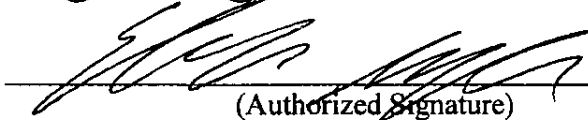
ePurcell@barrelandscrew.com
E-mail address: (to be used for future annual report notification)

CERTIFICATE OF DOMESTICATION

The undersigned, Elizabeth Purcell, Secretary,
(Name) (Title) **FILED 15 MAR 27 AM 11:19**
of Assets, Liabilities, & Equity Solutions,
(Corporation Name) **SECRETARY OF STATE**
in accordance with s. 607.1801, Florida Statutes, does hereby certify: **TALLAHASSEE, FLORIDA**
a foreign corporation

1. The date on which corporation was first formed was September 6, 2012.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Nevada.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Assets, Liabilities, & Equity Solutions 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 Assets, Liabilities, & Equity Solutions 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 Nevada.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am Secretary, of Assets, liabilities, & Equity Solutions Inc
and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done
so this the 19 day of December, 2013.


(Authorized Signature)

Filing Fee:

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

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

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Assets, Liabilities, & Equity Solutions Inc

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

Mailing Address

2985 44th Ave N

2985 44th Ave N

ST. Petersburg, FL 33714

St. Petersburg, FL 33714

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Repairs of metal conveying units.

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 1

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Title/Name

Robert Essery →
2985 44th Ave N
ST-Petersburg, FL 33714

Title/Name

President

Title/Name

Elizabeth Percell
2985 46th Ave N
ST-Petersburg, FL 33714

Title/Name

Secretary

Title/Name

Title/Name

Title/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:

____ Elizabeth Rrcell ____
2985 44th Ave N
ST. Pete, FL 33714

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

____ Elizabeth Rrcell ____
2985 44th Ave N
ST. Pete, FL 33714

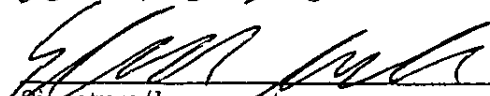
**HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR WITH AND
ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.**



Signature/Registered Agent

12/20/13

Date



Signature/Incorporator

12/20/13

Date