

P15000089492

(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



900275954969

900275954969
10/13/15--01007--002 **137.50

W15-069555

11/03/15



FLORIDA DEPARTMENT OF STATE
Division of Corporations

15

SEC
TALL

October 20, 2015

JACQUILINE WILSON
55 S.E. 2ND AVE.
SUITE 307
DELRAY BEACH, FL 33444

SUBJECT: PARAMOUNT SOLUTIONS, INC.
Ref. Number: W15000069555

We have received your document for PARAMOUNT SOLUTIONS, INC. and your check(s) totaling \$137.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P97000048614 (PARAMOUNT SOLUTIONS, INC.).

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.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 515A00022168

COVER LETTER

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

SUBJECT: Business Relocating from Georgia to Florida

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	\$ <u>78.75</u>
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
-----------------------	---------

Paramount Solutions & Global Services, Inc.

Name (printed or typed)

55 SE 2nd Avenue

Address

Delray Beach, Fl 33444

City, State & Zip

770-645-1155 or 561-961-5111

Daytime Telephone Number

jwilson@psinc3.com

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

CERTIFICATE OF DOMESTICATION

The undersigned, Jacqueline Wilson, President and CEO,
(Name) (Title)

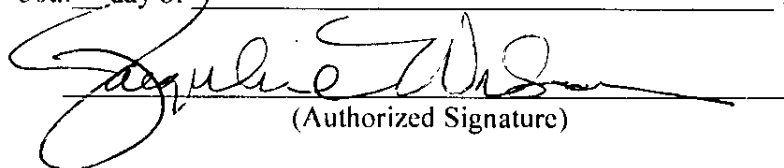
of Paramount Solutions, Inc. a foreign corporation,
(Corporation Name)

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

1. The date on which corporation was first formed was August 25, 2004.
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 Paramount 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 Paramount Solutions & Global Services, 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 227 Village Square Dr. Woodstock, GA 30188.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am President/CEO, of Paramount Solutions, Inc.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 30th day of October, 2015.


(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:

Paramount Solutions & Global Services,
Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

Mailing Address

55 S.E. 2nd Ave, Delray Beach, Fl 33444

same

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Provide professional and technical services to public and private sectors.

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 10,000

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

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

Title/Name

President/CEO -Jacqueline Wilson

CFO/Treasurer - Jacqueline Wilson

Secretary - Jacqueline Wilson

Title/Name

Title/Name

Title/Name

Title/Name

V.P. and Director -Gilbert Wilson Sr

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:

Jacqueline Wilson

9925 NW 68 Place, Unit J209

Tamarac, FL 33321

ARTICLE VII INCORPORATOR

THE **NAME AND ADDRESS** OF THE INCORPORATOR IS:

Jacqueline Wilson

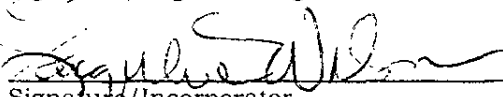
9925 NW 68 Place, Unit J209

Tamarac, FL 33321

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

10/30/15
Date


Signature/Incorporator

10/30/15
Date