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SECRETARY OF STATE OF

Z 12/29/15

COVER LETTER

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

SUBJECT:

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

CORPORATE PAYMENT SERVICES, INC.

Name (printed or typed)

333 WOODY CIRCLE

Address

MELBOURNE BEACH, FL 32951

City, State & Zip

801-738-3675 option 1

Daytime Telephone Number

chadw@shieldpayments.com

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

CERTIFICATE OF DOMESTICATION

The	e undersigned, CHAD WENGEL	PRESIDENT			
(Name)		(Title)			
of.	CORPORATE PAYMENT SERVICES, INC.	a forei	gn corporation,		
in a	(Corporation Name) accordance with s. 607.1801, Florida Statutes, does hereby	certify:			
1.	The date on which corporation was first formed was DEC	CEMBER 13	, <u>2010</u> .		
2.	The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was UTAH				
3.	The name of the corporation immediately prior to the filing of this Certificate of Domestication was CORPORATE PAYMENT 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 CORPORATE PAYMENT 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 UTAH				
	Attached are Florida articles of incorporation to complete to s. 607.1801. CHAD WENGEL, of CORPORATE PAYMENT	ŕ	rements pursuant		
and	I am authorized to sign this Certificate of Domestication or this the 11 day of DECEMBER	behalf of the corporation	on and have done		
	(Authorized Signature				
	Filing Fee: Certificate of Domestication Articles of Incorporation and Certified Total to domesticate and file	\$ 50.00	SECRE JAKT SPORATIONS 15 DEC 16 PH 12: 05		

ARTICLES OF INCORPORATION IN COMPLIANCE WITH CHAPTER 607, F.S. ARTICLE I NAME THE NAME OF THE CORPORATION SHALL BE: CORPORATE PAYMENT SERVICES, INC. ARTICLE II PRINCIPAL OFFICE THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS: Principal Address Mailing Address 333 WOODY CIRCLE 333 WOODY CIRCLE MELBOURNE BEACH, FL 32951 MELBOURNE BEACH, FL 32951 ARTICLE III PURPOSE THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED: ANY LEGAL OR LAWFUL PURPOSE

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	Title/Name
CHAD WENGEL, PRESIDENT	WENDI WENGEL, DIRECTOR
333 WOODY CIRCLE	333 WOODY CIRCLE
MELBOURNE BEACH, FL 32951	MELBOURNE BEACH, FL 32951
Title/Name	Title/Name
CHAD WENGEL, TREASURER	
333 WOODY CIRCLE	
MELBOURNE BEACH, FL 32951	
Title/Name	Title/Name
CHAD WENGEL, DIRECTOR	
333 WOODY CIRCLE	
MELBOURNE BEACH, FL 32951	
Title/Name	Title/Name
WENDI WENGEL, SECRETARY	
333 WOODY CIRCLE	
MELBOURNE BEACH, FL 32951	

ARTICLE VI INITIAL REGISTERED AGENT A	····
THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPT	PTABLE) OF THE REGISTERED AGENT IS:
CHAD WENGEL	
333 WOODY CIRCLE	
MELBOURNE BEACH, FL 32951	
ARTICLE VII INCORPORATOR THE NAME AND ADDRESS OF THE INCORPORATOR IS:	
CHAD WENGEL	
333 WOODY CIRCLE	
MELBOURNE BEACH, FL 32951	
***********	***********
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEP STATED CORPORATION AT THE PLACE DESIGNATED IN THIS C ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGR	CERTIFICATE, I AM FAMILIAR WITH AND
M	12/11/15
Signature/Registered Agent	Date
	14/11/15
Signature/Incorporator	Date