

P 16000054237

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

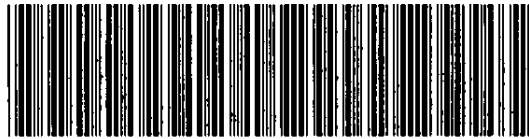
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16000054237, P10004

6/28/16

COVER LETTER

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

SUBJECT: DOMESTICATION OF VIRGINIA S-CORP TO FLORIDA S- CORPORATION

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

KIM HARKIN CPA, INC

Name (printed or typed)

8948 LAKE KATHRYN DRIVE

Address

PONTE VEDRA BEACH, FL 32082

City, State & Zip

(214)454-3574

Daytime Telephone Number

kannsomers@aol.com

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

FILED
16 JUN 23 PM 2:36
TALLAHASSEE, FL 32314
SECRETARY OF STATE

COVER LETTER

FILED
16 JUN 20 PM 2:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: DOMESTICATION OF VIRGINIA S-CORP TO FLORIDA S-CORP

To whom it may concern:

I moved to Florida and proceeded to file Articles of Incorporation for my wholly owned company – Kim Harkin CPA, Inc.

It is my intention to move my state charter to Florida from Virginia pursuant to the Florida Domestication provisions.

However, I proceeded to file my Articles of Incorporation PRIOR to filing this attached Domestication Certificate.

This was an ERROR. So I had to dissolve the company – Kim Harkin CPA, Inc. so that I could do this process in the proper order.

(I also had to request an amendment to change my company name in Virginia from a P.C. to INC. to comply with Florida Corporate Rules – I attached all the documents).

I respectfully request that I be allowed to continue to use the name of my company as Kim Harkin CPA, Inc. as it has value to me and my clients.

I state I will never revoke the dissolution date June 10, 2016. Therefore, I understand it would be permissible to use the name again in this process.

Please contact me if there are any questions regarding this request at (214)454-3574.

Many thanks.

Kim Harkin

Kimberly Harkin
Signature/Incorporator

June 15, 2016
Date

CERTIFICATE OF DOMESTICATION

The undersigned, KIMBERLY HARKIN, PRESIDENT,
(Name) (Title)

of KIM HARKIN CPA, 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 JUNE 6, 2003.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was COMMONWEALTH OF VIRGINIA.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was KIM HARKIN CPA, 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 KIM HARKIN CPA, 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 COMMONWEALTH OF VIRGINIA.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am KIM HARKIN, of KIM HARKIN CPA, INC

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 15th day of June, 2016.

Kimberly Harkin
(Authorized Signature)

Filing Fee:	
Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	<u>\$ 78.75</u>
Total to domesticate and file	<u>\$128.75</u>

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TALLAHASSEE, FLORIDA
STATE

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

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

KIM HARKIN CPA, INC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

Mailing Address

8948 LAKE KATHRYN DR
PONTE VEDRA BEACH
FLORIDA 32082

SAME AS PRINCIPAL

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

TO PROVIDE TAX COMPLIANCE AND TAX CONSULTING TO CLIENTS.

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 100

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

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

Title/Name

KIM HARKIN - PRESIDENT

VICE PRESIDENT/TREASURY/

SECRETARY

Title/Name

Title/Name

Title/Name

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:

KIM HARKIN

8948 LAKE KATHRYN DRIVE

PONTE VEDRA BEACH, FL 32082

ARTICLE VII INCORPORATOR

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

KIM HARKIN

8948 LAKE KATHRYN DRIVE

PONTE VEDRA BEACH, FL 32082

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.

Kimberley Harkin
Signature/Registered Agent

6/15/2016
Date

Kimberley Harkin
Signature/Incorporator

6/15/2016
Date

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TALLAHASSEE
FLORIDA