

P 16000055770

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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16 JUN 28 PM 2:38
SECURITY

7/6/16

COVER LETTER

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

SUBJECT: RAW LIFE 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	\$ <u>78.75</u>
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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Name (printed or typed)

Address

City, State & Zip

Daytime Telephone Number

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

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DEPARTMENT OF STATE
TALLAHASSEE, FL 32314

CERTIFICATE OF DOMESTICATION

The undersigned, PAUL NISON, PRESIDENT,
(Name) (Title)

of RAW LIFE 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 MARCH 15, 2007.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was OKLAHOMA.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was RAW LIFE 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 RAW LIFE 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 OKLAHOMA.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am PRESIDENT, of RAW LIFE INC

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 20TH day of JUNE, 2016.

✓ 
(Authorized Signature)

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

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

FILED

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ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

RAW LIFE INC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

Principal Address

Mailing Address

300 RANDOLPH COURT

SAME

LAKE WORTH, FL 33461

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

ALL LEGAL AND LAWFUL BUSINESS

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

PRESIDENT/PAUL NISON

300 RANDOLPH COURT

LAKE WORTH, FL 33461

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:

PAUL NISON

300 RANDOLPH COURT

LAKE WORTH, FL 33461

ARTICLE VII INCORPORATOR

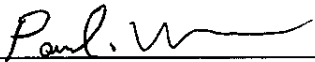
THE **NAME AND ADDRESS** OF THE INCORPORATOR IS:

JOANNE FARRAR CPA PA

12773 FOREST HILL STE 1201

WELLINGTON, FL 33414

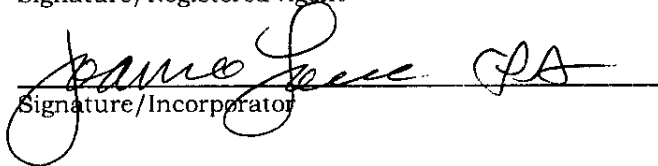
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

✓ 

Signature/Registered Agent

6/20/16

Date

 PA

Signature/Incorporator

6/20/16

Date

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16 JUN 28 PM 2:38
CLERK OF STATE
TALLAHASSEE, FL 32304