

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H16000261012 3)))



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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : VIERA WILLIAMS, P.A.
Account Number : I20090000023
Phone : (850)222-0013
Fax Number : (850)222-9047

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: tabitha@wellsbizsolutions.com

**DOMESTICATION
PURPLE OAK, INC.**

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$137.50

S GILBERT
OCT 28 2016

RECEIVED
16 OCT 27 PM 2:14
OFFICE OF THE CLERK
DIVISION OF CORPORATIONS
STATE OF FLORIDA

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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

Timothy P. Sparks

Name (printed or typed)

701 E. Tennessee Street

Address

Tallahassee, Florida 32308

City, State & Zip

(850) 222-0013

Daytime Telephone Number

TSparks@vierawilliams.com

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

INH53 (12/12)

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CERTIFICATE OF DOMESTICATION

The undersigned, Kathleen DeCarlo, President
 (Name) (Title)

of PURPLE OAK, 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 January 23rd, 1997.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Illinois.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was PURPLE OAK, 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 PURPLE OAK, 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 Illinois.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am President, of PURPLE OAK, INC.

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

Kathleen DeCarlo
 (Authorized Signature)

Filing Fee:

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

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

FILED
16 OCT 27 AM 10:27
CLERK OF CIRCUIT COURT
FLORIDA

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

PURPLE OAK, INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

Principal Address

Mailing Address

6752 W. Gulf to Lake Hwy

6752 W. Gulf to Lake Hwy

#414

#414

Crystal River, Florida 34429

Crystal River, Florida 34429

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Any lawful purpose.

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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

Kathleen DeCarlo

Title/Name

6752 W. Gulf to Lake Hwy

#414

Crystal River, Fl 34429

Title/Name

Secretary

Kathleen DeCarlo

Title/Name

6752 W. Gulf to Lake Hwy

#414

Crystal River, Fl 34429

Title/Name

Title/Name

Title/Name

Title/Name

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ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Tabitha Wells

3650 E Ryan St

Inverness, FL 34453

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Timothy P. Sparks

701 E. Tennessee Street

Tallahassee, Florida 32308

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.

Tabitha Wells
Signature/Registered Agent

10/20/2016
Date

Timothy P. Sparks
Signature/Incorporator

10/20/16
Date

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