# FAX No Division of Corporations

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## **DOMESTICATION** PRINT TRONIC, CORP.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$128.75

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Corporate Filing Menu

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M. MOON MAR 2 0 2017

#### CERTIFICATE OF DOMESTICATION

Th	ne undersigned, THOWAS BRECHT	PRESIDENT
	(Name)	(Title)
of	PRINT TRONIC, CORP.	a foreign corporation.
in	(Corporation Name) accordance with s. 607.1801, Florida Statutes, does hereby	certify:
1.	The date on which corporation was first formed was JUI	NE 29 , 2009 .
2.	The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was DELAWARE	
3.	. The name of the corporation immediately prior to the filing of this Certificate of Domestication was PRINT TRONIC, CORP.	
4.	The name of the corporation, as set forth in its articles of s. 607.0202 and 607.0401 with this certificate is PRINT	
<b>5</b> .	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 DELAWARE	
б.	Attached are Florida articles of incorporation to complete to s. 607.1801.	the domestication requirements pursuant
an	PRESIDENT , of THOMAS BRECHT	
	am authorized to sign this Certificate of Domestication on his the 10 day of MARCH	behalf of the corporation and have done
	(Authorized Signature	<u> </u>

, СД

1085 PC

## ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME	
THE NAME OF THE CORPORATION SHALL BE:	•
PRINT TRONIC, CORP.	
ARTICLE II PRINCIPAL OFFICE	
THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDR. Principal Address	ESS IS:  Moiling Address
999 PONCE DE LEON BLVD	SAME
SUITE: 705	
CORAL GABLES, FL 33134	
ARTICLE III PURPOSE	
THE PURPOSE FOR WHICH THE CORPORATION IS OF	CGANIZED:
ANY AND ALL LAWFUL BUSINESS	
•	
	-

036

ARTICLE IV SHARES
THE NUMBER OF SHARES OF STOCK IS: 100 @ \$1,00

## ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

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

Title/Name	Title/Name
THOMAS BRECHT (PC)	CARLOS LOPEZ (VPD)
999 PONCE DE LEON BLVD STE: 705	989 PONCE DE LEON BLVD STE: 705
CORAL GABLES, FL 33134	CORAL GABLES, FL 33134
Title/Name	Title/Name
GUILLERMO RICKEN (VPD) ABOUTE	
999 PONCE DE LEON BLVD STE: 705	
CORAL GABLES, FL 33134	
Title/Name  DAEAEL DICO (SD)	Title/Name
RAFAEL RICO (SD)	
999 PONCE DE LEON BLVD STE: 705	
CORAL GABLES, FL 33134	
Title/Name EMILIA RICKEN (TD)	Title/Name
999 PONCE DE LEON BLVD STE: 705	,
CORAL GABLES, FL 33134	

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTA	BLE) OP THE REGISTERED AGENT IS:
PADIAL & COMPANY PA	17:
999 PONCE DE LEON BLVD STE; 705	
CORAL GABLES, FL 33134	. 5
ARTICLE VII INCORPORATOR THE NAME AND ADDRESS OF THE INCORPORATOR IS: THOMAS BRECHT	17 P. 18 P.
999 PONCE DE LEON BLVD STE: 705	
CORAL GABLES, FL 33134	•
****	**************************************
HAVING HEEN NAMED AS REGISTERED AGENT AND TO ACCEPT S STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CER ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE Signature/Registered Agent Signature/Incorporator	TIFICATE, I AM FAMILIAR WITH AND