

P17000026452

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

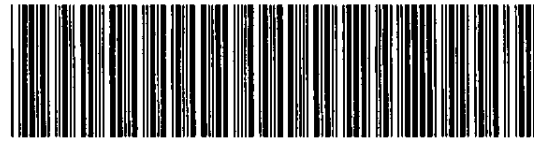
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100296396471

03/23/17--01010--018 **137.50

FILED
17 MAR 23 AM 10:51
CLERK OF STATE
TALLAHASSEE, FLORIDA

T. BURCH

MAR 24 2017

COVER LETTER

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

SUBJECT: Three Eagles, 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	\$ 78.75
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
-----------------------	---------

Crispin Lachner

Name (printed or typed)

2784 S Ocean Blvd. Apt 403N

Address

Palm Beach, FL 33480

City, State & Zip

(360) 201-3789

Daytime Telephone Number

kip765@gmail.com

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

CERTIFICATE OF DOMESTICATION

The undersigned, Crispin Lachner, President
(Name) (Title)
of Three Eagles, 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 May 12, 2000.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Washington.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Three Eagles, 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 Three Eagles, 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 Washington.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am President, of Three Eagles, Inc.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 1st day of March, 2017.



(Authorized Signature)

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

EXHIBIT

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

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Three Eagles, Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

Mailing Address

2784 S Ocean Blvd Apt 403N

2784 S Ocean Blvd Apt 403N

Palm Beach, FL 33480

Palm Beach, FL 33480

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Any and all lawful business.

FILED
17 MAR 23 AM 10:51
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 1,000

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

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

Title/Name

Director / Crispin Lachner

2784 S Ocean Blvd Apt 403N

Palm Beach, FL 33480

Title/Name

President / Crispin Lachner

2784 S Ocean Blvd Apt 403N

Palm Beach, FL 33480

Title/Name

Secretary / Crispin Lachner

2784 S Ocean Blvd Apt 403N

Palm Beach, FL 33480

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

FILED
17 MAR 23 AM 10:51
CLERK OF STATE
PALM BEACH, FLORIDA

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Crispin Lachner

2784 S Ocean Blvd Apt 403N

Palm Beach, FL 33480

ARTICLE VII INCORPORATOR

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


Crispin Lachner

2784 S Ocean Blvd Apt 403N

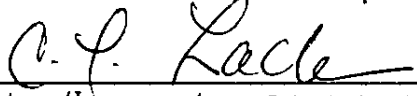
Palm Beach, FL 33480

FILED
17 MAR 23 AM 10:51
CLERK OF STATE
TALLAHASSEE, FLORIDA

**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 Crispin Lachner

March 1, 2017
Date


Signature/Incorporator Crispin Lachner

March 1, 2017
Date