Pn0000H0239

(Requestor's Name)				
(Address)				
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate	es of Status		
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COVER LETTER

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

SUBJECT:

ENOM427, INCORPORATED

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

Norma C. Wheeler

Name (printed or typed)

12808 Gran Bay Parkway West

Address

Jacksonville, FL 32258

City, State & Zip

904-251-6558

Daytime Telephone Number

nwheeler@web.com

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

CERTIFICATE OF DOMESTICATION

The unders	_{igned,} Norma C. Wheeler	Manager, Paral	egal
	(Name)	(Title)
of ENOM	1427, INCORPORATED	a fo	oreign corporation,
in accordan	(Corporation Name) ace with s. 607.1801, Florida Statutes, does	hereby certify:	
1. The dat	e on which corporation was first formed wa	s June 19	<u>2006</u> .
=	isdiction where the above named corporation to being was NEVADA	n was first formed, incorpo	
	me of the corporation immediately prior to t NOM427, INCORPORATED	he filing of this Certificate	of Domestication
4. The nar	me of the corporation, as set forth in its artic	eles of incorporation, to be	filed pursuant to
	0202 and 607.0401 with this certificate is		·
adminis	isdiction that constituted the seat, siege soci stration of the corporation, or any other equi lately before the filing of the Certificate of I A	ivalent jurisdiction under ap	
6. Attache to s. 60	ed are Florida articles of incorporation to co 7.1801.	mplete the domestication re	equirements pursuant
I am MAN	AGER, of ENOM427, INCOR	PORATED	
	horized to sign this Certificate of Domestica 25TH day of APRIL	ation on behalf of the corpo	oration and have done, 2017
	(Authorized S		T HAY -4 SECRETARY TALLLAHASSI
	Certificate of Domestication Articles of Incorporation and Co Total to domesticate and file	\$ 50.0	15 For I

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

ARTICLE I NAME	
THE NAME OF THE CORPORATION SHALL BE:	
SNAPNAMES 49, INC.	
ARTICLE II PRINCIPAL OFFICE THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS Principal Address 12808 GRAN BAY PARKWAY WEST JACKSONVILLE, FL 32258	Mailing Address SAME
ARTICLE III PURPOSE THE PURPOSE FOR WHICH THE CORPORATION IS ORGANI DOMAIN REGISTRAR	ZED:
	THAT -4

THE NUMBER OF SHARES OF STOCK IS: 10,000,000

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

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

Title/Name	Title/Name		
PRESIDENT/DAVID L. BROWN	VICE PRESIDENT AND TREASURER/KEVIN M. CARNEY		
12808 GRAN BAY PARKWAY WEST	12808 GRAN BAY PARKWAY WEST		
JACKSONVILLE, FL 32258	JACKSONVILLE, FL 32258		
Title/Name	Title/Name		
CHIEF LEGAL OFFICER AND SECRETARY/MATTHEW P. MCCLURE			
12808 GRAN BAY PARKWAY WEST			
JACKSONVILLE, FL 32258			
Title/Name	Title/Name		
Title/Name	Title/Name		
	PAR SI RE REPORTED TO THE REPORT OF THE REPO		

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

1201 Hays Street Tallahassee FL 32301

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

NORMA C. WHEELER

12808 GRAN BAY PARKWAY WEST

JACKSONVILLE, FL 32258

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.

Harry B. Davis

Asst. Vice President

Signature/Incorporator

4-25-2017