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(Requestor's Name)			
(Address)			
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PICK-UP	MAIT	MAIL	
(Business Entity Name)			
(Do	cument Number)		
Certified Copies	_ Certificates	s of Status	
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COVER LETTER

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

SUBJECT:

ENOM403, 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	\$1	28.75

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 undersigned, Norma C. Wheeler	Manager, Paralegal
(Name)	(Title)
of ENOM403, INCORPORATED	a foreign corporation,
(Corporation Name) in accordance with s. 607.1801, Florida Statutes, does h	nereby certify:
1. The date on which corporation was first formed was	s June 19 , 2006 .
2. The jurisdiction where the above named corporation came into being was NEVADA	n was first formed, incorporated, or otherwise
3. The name of the corporation immediately prior to the was ENOM403, INCORPORATED	ne filing of this Certificate of Domestication
4. The name of the corporation, as set forth in its artic	les of incorporation, to be filed pursuant to
s. 607.0202 and 607.0401 with this certificate is	·
5. The jurisdiction that constituted the seat, siege social administration of the corporation, or any other equinamediately before the filing of the Certificate of DIEVADA	valent jurisdiction under applicable law,
 Attached are Florida articles of incorporation to cor to s. 607.1801. 	nplete the domestication requirements pursuant
I am MANAGER , of ENOM403, INCOR	PORATED
and am authorized to sign this Certificate of Domestica	ation on behalf of the corporation and have done 2017
so this the 25TH day of APRIL	hele Es.
(Authorized Si	gnature)
Filing Fo	ee:
Certificate of Domestication	s 50.00 ⊊∯ ā C
Articles of Incorporation and Ce Total to domesticate and file	**rtified Copy

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

THE NAME OF THE CORPORATION SHALL BE:		
SNAPNAMES 37, 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 ORGANIZE DOMAIN REGISTRAR	ED:	
		A _S

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

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

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

Title/Name PRESIDENT/DAVID L. BROWN	Title/Name 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			
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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:

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.

Signature/Registered Agent

Harry B. Davis

Asst. Vice President

Eignature/Incorporator

Date

4-25-2017

Date

TAILLANASSEE FIGURE