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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	<u> </u>
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Office Use Only



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SECRETARY OF STATE
FALL MASSET FIRMINA

MAY 26 2017 T SCHROEDER

COVER LETTER

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

SUBJECT:

ENOMMX, 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	\$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 ENOMMX, INC.	a foreign corporation				
(Corporation Name) in accordance with s. 607.1801, Florida Statutes, do	es hereby certify:				
1. The date on which corporation was first formed	was February 6 , 2006				
2. The jurisdiction where the above named corpora came into being was NEVADA	ition was first formed, incorporated, or otherwise				
 The name of the corporation immediately prior t was ENOMMX, INC. 	o the filing of this Certificate of Domestication				
4. The name of the corporation, as set forth in its an	rticles of incorporation, to be filed pursuant to				
s. 607.0202 and 607.0401 with this certificate is SNAPNAMES 92, INC.	·				
5. The jurisdiction that constituted the seat, siege sadministration of the corporation, or any other elimmediately before the filing of the Certificate of NEVADA	quivalent jurisdiction under applicable law,				
6. Attached are Florida articles of incorporation to to s. 607.1801.	complete the domestication requirements pursuant				
I am MANAGER , of ENOMMX, INC.					
and am authorized to sign this Certificate of Domes	tication on behalf of the corporation and have done				
so this the 25TH day of APRIL	<u>, 2017</u>				
1 rue () 4	Heile, Warrey Garaloyal d Signature)				
Filing Certificate of Domestication Articles of Incorporation and Total to domesticate and file	S Fee: \$ 50.00				

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ΑI	₹TI	CLE	I	N	AME

THE NAME OF THE CORPORATION SHALL BE:

SNAPNAMES 92, INC. ARTICLE II PRINCIPAL OFFICE THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS: Principal Address Mailing Address 12808 GRAN BAY PARKWAY WEST SAME JACKSONVILLE, FL 32258 ARTICLE III PURPOSE THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED: DOMAIN REGISTRAR

17 MAY 25 AM 9: 16

ARTICLE IV SHARES 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 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				
	Re t				
Title/Name	Title/Name Title/Name Title/Name Title/Name Title/Name Title/Name Title/Name				

ARTICLE VI INIT	TIAL 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/Registeres Agent

Harry B. Davis

Asst. Vice President

/ Signature/Incorporator

Date

4-25-2017

Date

17 HAY 25 AM 9: 19
SCURLIARY OF STATE
PALL SHARSSEE FRANCE