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| (Rec                                    | questor's Name)   |             |
|---|-------------------|-------------|
| (Add                                    | dress) .          | ·           |
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| (City                                   | y/State/Zip/Phone | e #)        |
| PICK-UP                                 | WAIT              | MAIL        |
| (Bus                                    | siness Entity Nar | me)         |
| (Do                                     | cument Number)    | · '         |
| Certified Copies                        | Certificates      | s of Status |
| Special Instructions to Filing Officer: |                   |             |
| F.                                      |                   |             |
|   |                   |             |
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Office Use Only



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SHARKEE FLOORS

SHARKEE FLOORS

T. BURCH

T. BURCH JUN 1 6 2017

#### **COVER LETTER**

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

SUBJECT:

Brad M. King Associates, 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

Brad M. King Associates, Inc.

Name (printed or typed)

2201 Collins Ave. #908

Address

Miamim Beach, FL33139

City, State & Zip

3106254808

Daytime Telephone Number

bradking10@gmail.com

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

## CERTIFICATE OF DOMESTICATION The undersigned, Brad M. King President (Name) (Title) of Brad M. King Associates, 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 October 13 1982 2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was New York 3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Brad M. King Associates, 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 Brad M. King Associates, 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 New York 6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801. I am Brad M. King of Brad M. King Associates, Inc and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the day of \_ Filing Fee: **Certificate of Domestication** \$ 50.00 **Articles of Incorporation and Certified Copy** \$ 78.75

\$128.75

Total to domesticate and file

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

| ARTICLE I NAME   |   |
|--|---|
| THE NAME OF THE CORPORATION SHALL BE:                                  |   |
| Brad M. King Associates, Inc.  |   |
|  |   |
| ARTICLE II PRINCIPAL OFFICE  |   |
| THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS A<br>Principal Address | IS: Mailing Address   |
| 2201 Collins Ave, #908 Miami Beach, FL 33139                           | 2201 Collins Ave, #908, Miami Beach, FL33139                      |
|  | <del></del>   |
|  |   |
|  |   |
|  |   |
| ARTICLE III PURPOSE  |   |
| THE PURPOSE FOR WHICH THE CORPORATION IS ORGAI                         | NIZED:  |
| To sell, solicit, advise, consult and service insurance and fincan     | icial related prouctds for personal clients and corporate clients |
| whereby the corproation will act usually but not                       | be limited to as broker or producer.                              |
|  |   |
|  |   |
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| · · · · · · · · · · · · · · · · · · ·                                  |   |
|  |   |

| Title/Name  Brad M. King | Title/Name  President and Treasurer |  |
|--------------------------|-------------------------------------|--|
| Brad M. King             | Secretary                           |  |
| Title/Name               | Title/Name                          |  |
| Title/Name               | Title/Name                          |  |
|                          |                                     |  |
| Title/Name               | Title/Name                          |  |

ARTICLE IV SHARES
THE NUMBER OF SHARES OF STOCK IS: 100

### ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

**BRAD KING** 

2201 Collns Ave #908

Miami Beach, FL 33139

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

**BRAD M KING** 

2201 COLLINS Ave #908

Miami Beach, FI 33139

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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 PAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

Signature/Registered Agent

Senature/Incorporator

Date

Date