

JUN/08/2018/FRI 3:38 PM
6/8/2018

Florida Department of State
Division of Corporations

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Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : THE FARR LAW FIRM
Account Number : 103654001666
Phone : (941)639-1158
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Email Address: Sfaircloth@farr.com

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOMESTICATION
Burkin Design, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$120.00

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DIVISION OF CORPORATIONS
COMMERCIAL
REGISTRATION SERVICES

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Corporate Filing Menu

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COVER LETTER

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

SUBJECT: Domestication of Burkin Design, 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	<u>\$ 78.75</u>
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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Burkin Design, Inc.

Name (printed or typed)

3849 Acline Rd, Unit 114

Address

Punta Gorda, FL 33950

City, State & Zip

336-275-7588

Daytime Telephone Number

laura@burkindesign.com

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

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CERTIFICATE OF DOMESTICATIONSECRETARY OF STATE
TALLAHASSEE, FLORIDAThe undersigned, Laura Burkin, President
(Name) (Title)of Burkin Design, 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 December 10, 2001.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was North Carolina.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Burkin Design, 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 Burkin Design, 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 North Carolina.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am President, of Burkin Design, Inc.
and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 7th day of June, 2018.
(Authorized Signature)**Filing Fee:**

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Burkin Design, Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

Mailing Address

3849 Acline Road

3849 Acline Road

Unit 114

Unit 114

Punta Gorda, FL 33950

Punta Gorda, FL 33950

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

This corporation is organized for the following purposes: to carry
on any business permitted under the laws of the State of Florida.

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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

Laura Burkin

President

Title/Name

Title/Name

Title/Name

Title/Name

Richard Burkin

Vice President, Secretary &

Treasurer

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:

Laura Burkin

2436 Rosa Lane

Punta Gorda, FL 33950

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Laura Burkin

3849 Acline Road, Unit 114

Punta Gorda, FL 33950

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SECRETARY 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

06-07-2018

Date



Signature/Incorporator

06-07-2018

Date

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