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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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D O'KEEFE FEB 2.2 2019

W19-11428



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 5, 2019

MICHELLE BUSTAMANTE 2112 123RD TERRACE EAST PARRISH, FL 34219

SUBJECT: ARDENT CPA Ref. Number: W19000011428

We have received your document for ARDENT CPA and your check(s) totaling \$137.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please remove the title "Owner" from the application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 119A00002522

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www.sunbiz.org

COVER LETTER

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

SUBJECT: Domestication of Ardent CPA, 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

Michelle Bustamante

Name (printed or typed)

2112 123rd Terrace East

Address

Parrish, FL 34219

City, State & Zip

817-807-8164

Daytime Telephone Number

michelle@ardentcpa.com

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

CERTIFICATE OF DOMESTICATION

Th	e undersigned, Michelle Bustamante	Owner				
	(Name)	(Title)				
of	Ardent CPA, Inc.	a foreig	gn corporation,			
in a	(Corporation Name) accordance with s. 607.1801, Florida Statutes, does hereby		,			
	The date on which corporation was first formed was Fel	-	_, 2017			
2.	The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Wyoming					
3.	. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Ardent CPA, 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 Ardent CPA, 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 Wyoming					
6.	Attached are Florida articles of incorporation to complete to s. 607.1801.	e the domestication requir	ements pursuant			
l a	m Michelle Bustamante of Ardent CPA, Inc.		· · · · · · · · · · · · · · · · · · ·			
	d am authorized to sign this Certificate of Domestication of this the 22 day of January	·	on and have done			
	(Authorized Signatu	re)				
	Filing Fee: Certificate of Domestication	\$ 50.00	19 FEB			

\$ 50.00

Articles of Incorporation and Certified Copy Total to domesticate and file

\$\frac{78.75}{\$128.75}

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME THE NAME OF THE CORPORATION SHALL BE:	
Ardent CPA, Inc.	
ARTICLE II PRINCIPAL OFFICE THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS: Principal Address 2112 123rd Terrace East	Mailing Address 2112 123rd Terrace East
Parrish, FL 34219	Parrish, FL 34219
ARTICLE III PURPOSE THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZ The purpose of the corporation is to engage in any lawful activity for	
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	PH 5: 0:

ARTICLE IV SHARES THE NUMBER OF SHARES OF STOCK IS:	· · · · · · · · · · · · · · · · · · ·	
ARTICLE V INITIAL DIRECTORS A		
THE NAME(S) AND ADDRESS(ES) AND SPECIFIC	TITLES:	
Title/Name	Title/Name	
President		
Michelle Bustamante		
Title/Name	Title/Name	
		······
	 	
Title/Name	Title/Name	
		19 f
		EB 19
Title/Name	Title/Name	

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Michelle Bustamante		
2112 123rd Terrace East		
Parrish, FL 34219		

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Michelle Bustamante

2112 123rd Terrace East

Parrish, FL 34219

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

Signature/Incorporator

Date

==

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STATE OF WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Ardent CPA

is a

Profit Corporation

formed or qualified under the laws of Wyoming did on **February 28, 2017**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2017-000744035**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 22nd day of January, 2019 at 1:41 PM. This certificate is assigned 029536222.

Secretary of State

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Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.