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19 APR 16 10:13 AM

2019 APR 16 10:13 AM

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D O'KEEFE

APR 16 2019

## COVER LETTER

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

SUBJECT: Shults Laboratories ~~LLC~~ CORPORATION

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	<u>\$128.75</u>

### OPTIONAL:

Certificate of Status

+  
\$ 8.75

137.50

Lyda Elizabeth Shults

Name (printed or typed)

PO Box 505 / 2390 Oak St.

Address

LANARK Village Florida 32323

City, State & Zip

850 370 1095

Daytime Telephone Number

Lyda.Elizabeth@gmail.com

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

## CERTIFICATE OF DOMESTICATION

The undersigned, Lyda Elizabeth Shults President  
(Name) (Title)

of Shults Laboratories Inc (Corp) 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 MARCH 7<sup>th</sup> 2012.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was SOUTH CAROLINA.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was SAME Shults Laboratories Corporation.
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 SHULTS LABORATORIES CORPORATION.
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 SOUTH CAROLINA.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am Lyda Elizabeth Shults of SHULTS

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 16<sup>th</sup> day of April, 2019.

Lyda Elizabeth Shults  
(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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2019 APR 15 PM 1:03

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

**ARTICLE I    NAME**

THE NAME OF THE CORPORATION SHALL BE:

SHULTS LABORATORIES ~~TECH~~ CORPORATION

**ARTICLE II    PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

Principal Address

Mailing Address

2390 OAK ST.

PO BOX 505

LANARK Village FL

LANARK Village FL

32323

32323

**ARTICLE III    PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

electronics, Robotics, electrical, electrical

FILED  
2017 JUL 20 11:03  
CLERK OF CIRCUIT COURT  
IN AND FOR THE COUNTY OF DADE, FLORIDA

**ARTICLE IV    SHARES**

THE NUMBER OF SHARES OF STOCK IS: 1,000,000

**ARTICLE V    INITIAL DIRECTORS AND/ OR OFFICERS**

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

Title/Name

Lyda Elizabeth Shults  
2390 Oak St.  
Lanark Village Fl. 32323

Title/Name

President  
PO Box 505  
32323

Title/Name

Charles William Shults  
2390 Oak St  
Lanark Village Fl  
32323

Title/Name

PO Box 505  
32323

Title/Name

   
   
 

Title/Name

   
   
 

Title/Name

   
   
 

Title/Name

   
   
 

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2023 OCT 10 AM 11:03  
CLERK

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

Lyda Elizabeth Shultz  
2390 Oak St. PO Box 505  
LANARK Village, FL 32323

**ARTICLE VII INCORPORATOR**

THE **NAME AND ADDRESS** OF THE INCORPORATOR IS:

Lyda Elizabeth Shultz  
2390 Oak St.  
LANARK Village FL 32323

\*\*\*\*\*

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.

Lyda Elizabeth Shultz  
Signature/Registered Agent

4/16/2019  
Date

Lyda Elizabeth Shultz  
Signature/Incorporator

4/16/2019  
Date

FILED  
2019 APR 16 AM 11:03  
CLERK OF COURT  
JACKSONVILLE, FL