

P19000050875

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

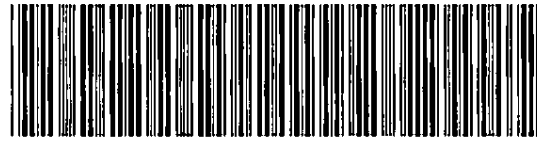
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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05/31/19--01019--008 \*\*128.75

FILED  
19 JUN 25 AM 7:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N CULLIGAN

JUN 24 2019

Dept of State  
Div of Corporations  
PO Box 6327  
Tallahassee FL 32314

May 23, 2019

From Kirk Walker  
Stellar Distribution, Inc.  
1850 SE 85<sup>th</sup> St. Rd  
Ocala, FL 34480  
[Kw61@sbcglobal.net](mailto:Kw61@sbcglobal.net)

Dear Representative,

I am including this additional cover letter to clarify what I intend to accomplish with the enclosed. I have a Corporation that began operations in 2005 and we have recently relocated to Florida from Kansas. I wish to transfer my corporate business license and entity registration to FL so we may do business as a Florida company.

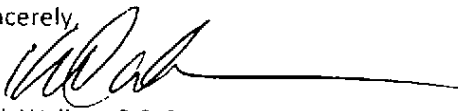
I want to link the fact that our company, being registered in FL, is the same company that was doing business in KS so there is a visible connection for confirmation by our clients and vendors. During a call this morning with your representative Lee, he suggested that I need to file an application for "Certificate of Domestication" which will allow that connection. He said if I filed an application for new business entity in FL that connection to my KS company would not be visible.

Part of the form for Cert of Domestication includes an "Optional" service to provide a Certificate of Status. I do not need that. There are lines below that option requesting info related to the entity and contact info. Since the phone number and email address were not requested elsewhere on the form I do not know if that is needed or not. I DO NOT WANT MY PHONE OR EMAIL INCLUDED IN FILING RECORDS VISIBLE TO PUBLIC ACCESS. PLEASE EXCLUDE THAT INFO WHEN FILING. Your form states that the email address is "to be used for future annual report notification" which is the reason it appeared that I needed to include the info in that section. Please DO NOT process a Certificate of Status for \$8.75.

The language in the first line where you input the Company Name followed by "a foreign corporation" is confusing to me. My company is a corporation formed and operated only in the U.S.A. Perhaps foreign is referenced to include U.S. states other than Florida.

Should you need to contact me relative to this inquiry or to my application to relocate/establish my business in FL please call me at 785-643-5873, or email me at [kw61@sbcglobal.net](mailto:kw61@sbcglobal.net). The application is enclosed along with a check for \$128.75 to include the fees listed on this application. Two copies of this application are included as the form requests.

Sincerely,



Kirk Walker, C.O.O.  
Stellar Distribution, Inc.

**COVER LETTER**

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

**SUBJECT:** Relocated Company from KS to FL-Please change Incorporation to show as a Florida S-Corp.

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

Current FEIN# 383726377  
Bus Entity ID# KS is 605 8341

**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~~

**Stellar Distribution, Inc.**

Name (printed or typed)

**1850 SE 85th St. Rd.**

Address

**Ocala, FL 34480**

City, State & Zip

**352-390-8005**

Daytime Telephone Number

**kw61@sbcglobal.net**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 13, 2019

KIRK WALKER  
1850 SE 85TH ST. ROAD  
OCALA, FL 34480

SUBJECT: STELLAR DISTRIBUTION, INC.  
Ref. Number: W19000056229

We have received your document for STELLAR DISTRIBUTION, INC. and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

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.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 819A00011826

**CERTIFICATE OF DOMESTICATION**

FILED

19 JUN 25 AM 7:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, Kirk Walker C.O.O.  
(Name) (Title)  
of Stellar Distribution, Inc.  
(Corporation Name) a foreign corporation,

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was August 25th, 2005.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Kansas.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Stellar Distribution, 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 Stellar Distribution, 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 Kansas.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am COO, of Stellar Distribution, Inc.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 23rd day of May, 2019.

  
(Authorized Signature)

<b>Filing Fee:</b>	
Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
<b>Total to domesticate and file</b>	<b>\$128.75</b>

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

FILED

19 JUN 25 AM 7:36

**ARTICLE I NAME**

*THE NAME OF THE CORPORATION SHALL BE:*

Stellar Distribution, Inc.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

*THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:*

Principal Address

Mailing Address

1850 SE 85th St. Rd

1850 SE 85th St. Rd

Ocala, FL 34480

Ocala, FL 34480

**ARTICLE III PURPOSE**

*THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:*

a) To accomplish any lawful business whatsoever, or which shall at any time appear conducive to or expedient for the protection or benefit of the Company and its assets.

b) To exercise all other powers necessary to or reasonably connected with the Company's business which may be legally exercised by corporations under the Florida Act

c) To engage in all activities necessary, customary, convenient, or incident to any of the foregoing.

**ARTICLE IV SHARES**

THE NUMBER OF SHARES OF STOCK IS: 100

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

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

Title/Name

C.O.O. Kirk Walker

1850 SE 85th St. Rd.

Ocala, FL 34480

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

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:

Kirk Walker

1850 SE 85th St. Rd.

Ocala, FL 34480

**ARTICLE VII INCORPORATOR**

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

Kirk Walker

1850 SE 85th St. Rd.

Ocala, FL 34480

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TALLAHASSEE, FLORIDA

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

Signature/Registered Agent

5/23/19

Date

Signature/Incorporator

5-23-19

Date