

A9 0000 8733A

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

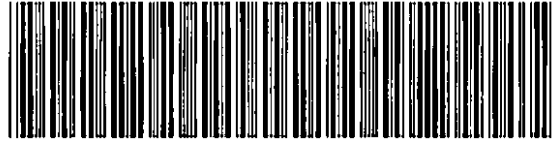
(Business Entity Name)

(Document Number)

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

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10/03/19--01007--024 \*\*128.75

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2019 NOV 26 AM 2:57

SECRETARY OF STATE  
TALLAHASSEE, FL

## COVER LETTER

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

SUBJECT: AL LONDINO & 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
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\_\_\_\_\_  
Name (printed or typed)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State & Zip

\_\_\_\_\_  
Daytime Telephone Number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 17, 2019

AL LONDINO  
1411 CELEBRATION AVE UNIT 405  
CELEBRATION, FL 34747

SUBJECT: AL LONDINO & ASSOCIATES, INC.  
Ref. Number: W19000092288

We have received your document for AL LONDINO & ASSOCIATES, 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):

You must list at least one incorporator with a complete business street address.

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.

Jessica A Fason  
Regulatory Specialist II

Letter Number: 919A00021421

## CERTIFICATE OF DOMESTICATION

The undersigned, AL LONDINO (Name) PRESIDENT (Title)

of AL LONDINO & ASSOCIATES, 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 MAY 6 1987.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was NEW JERSEY.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was AL LONDINO & 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 AL LONDINO & 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 JERSEY.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am PRESIDENT, of AL LONDINO & ASSOCIATES, INC

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 1 day of OCTOBER 2019.

Al Londino  
(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, FL

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

**ARTICLE I    NAME**

THE NAME OF THE CORPORATION SHALL BE:

AL LONDINO & ASSOCIATES, INC.

**ARTICLE II    PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

Principal Address

Mailing Address

1411 CELEBRATION AVE.

SAME

UNIT 405

CELEBRATION, FL 34747

**ARTICLE III    PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

EXECUTIVE SEARCH FIRM

**ARTICLE IV    SHARES**

THE NUMBER OF SHARES OF STOCK IS: 2500

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

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

Title/Name

Title/Name

PRESIDENT - AL LONDINO

1411 CELEBRATION AVE UNIT 405

CELEBRATION, FL 34747

Title/Name

Title/Name

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Title/Name

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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:

AL LONDINO  
1411 CELEBRATION AVE. UNIT 405  
CELEBRATION, FL 34747

**ARTICLE VII INCORPORATOR**

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

AL LONDINO  
1411 CELEBRATION AVE. UNIT 405  
CELEBRATION, FL 34747

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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.**

Al Londino  
Signature/Registered Agent

10/1/2019  
Date

Al Londino  
Signature/Incorporator

10/28/2019  
Date