

P2100000 2218

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

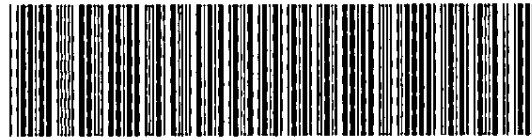
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: General Home Improvement Domestication Request

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

FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ <u>78.75</u>
Total filing fee	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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From: Fitzroy Cunningham

Name (printed or typed)

4430 SW 98TH STREET

Address

OCALA, FLORIDA 34476

City, State & Zip

(718)930-3725

Daytime Telephone Number

fitzroyhomeimprove@gmail.com

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

7/22/10 10:09:52

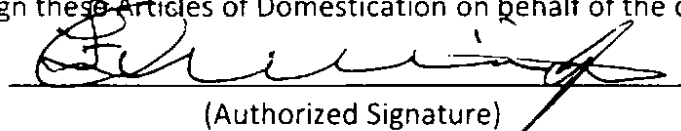
Articles of Domestication
Foreign Corporation Domesticating to Florida

The undersigned, Fitzroy Cunningham President
(Name) (Title)

of Fitzroy Home Improvement Inc., a foreign corporation, in accordance with s. 607.11922, Florida Statutes, submit these Articles of Domestication.

1. Then name of the domesticating corporation is Fitzroy Home Improvement Inc (Foreign Corporation)
2. The jurisdiction and date of its formation is May 13, 2014
3. The name of the domesticated corporation is Fitzroy Home Improvement Inc.
4. The jurisdiction of formation of the domesticated corporation is **Florida**
5. The domestication corporation is a foreign corporation and the domestication was approved in accordance with its organic law.
6. Attached are Florida Articles of Incorporation to complete the domestication requirements pursuant to s.607.0202, F.S.

I certify I am authorized to sign these Articles of Domestication on behalf of the corporation.


(Authorized Signature)

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ARTICLE V DIRECTORS AND/ OR OFFICERS

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

Name & Title: Fitzroy Cunningham-President

Name & Title: _____

Address: 4430 SW 98th Street
Ocala, Florida 34476

Address: _____

Name & Title: _____

Name & Title: _____

Address: _____

Address: _____

Name & Title: _____

Name & Title: _____

Address: _____

Address: _____

Name & Title: _____

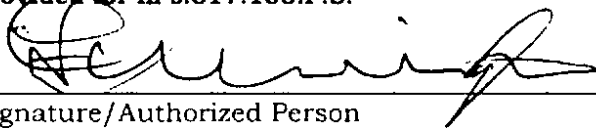
Name & Title: _____

Address: _____

Address: _____

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I submit this document and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155.F.S.



Signature/Authorized Person

11/5/2020
Date