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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

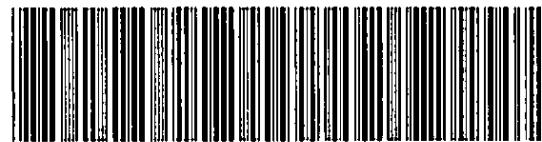
(Business Entity Name)

(Document Number)

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

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RECEIVED 11 AM 9/02  
SHERIFF'S OFFICE STATE  
OF FLORIDA  
TAMPA

## COVER LETTER

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

**SUBJECT:** Domestication of DLT Group, Inc.

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

**FEES:**

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

**OPTIONAL:**

Certificate of Status \$ 8.75

**From:** Charles Glatz MAIL: 137.50

**Name (printed or typed)**  
15633 Fiddlesticks Blvd

**Address**  
Fort Myers, FL 33912-3902

**City, State & Zip**

**(847) 922-8309**

**Daytime Telephone Number**

**c\_glatz@comcast.net**

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

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2021 OCT 11 AM 9:02

Articles of Domestication  
Foreign Corporation Domesticating to Florida

SECRETARIAL STATE  
TALLAHASSEE, FL

The undersigned, Charles Glatz President  
(Name) (Title)

of DLT Group, 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 DLT Group, Inc.  
(Foreign Corporation)
  
2. The jurisdiction and date of its formation is Illinois, June 6, 1995
  
3. The name of the domesticated corporation is DLT Group, 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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RECORDED IN THE STATE  
OF FLORIDA, FL

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

**ARTICLE I NAME**

THE NAME OF THE CORPORATION SHALL BE:

DLT Group, Inc.

**ARTICLE II PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

15633 Fiddlesticks Blvd.

Fort Myers, FL 33912-3902

Mailing Address

15633 Fiddlesticks Blvd.

Fort Myers, FL 33912-3902

**ARTICLE III PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Any and All Lawful Business

**ARTICLE IV SHARES**

THE NUMBER OF SHARES OF STOCK IS: 2,000

**ARTICLE VI REGISTERED AGENT AND STREET ADDRESS**

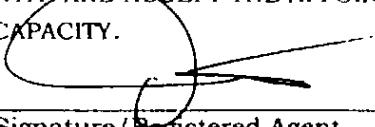
THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Charles Glatz

15633 Fiddlesticks Blvd.

Fort Myers, FL 33912-3902

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

10/7/2021  
Date

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REGISTRATION OF STATE  
FALL RIVER ISLANDS, FL

**ARTICLE V DIRECTORS AND/OR OFFICERS**

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

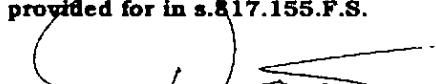
Name & Title: Charles Glatz, President

Address: 15633 Fiddlesticks Blvd.  
Fort Myers, FL 33912-3902

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

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

10/17/2021  
Date