

P22000010004

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

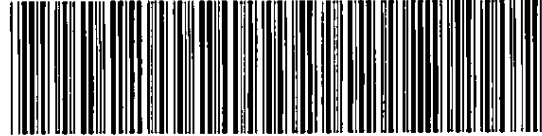
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FL

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

BLUE LAGOON ENTERPRISES CORP.

Signature _____

Requested by: _____

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

114 • Penders Printing • Tallahassee, GA 32301

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ ☒ Cert. Copy _____
____ Photo Copy _____
____ ☒ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
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____ Driving Record _____
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____ UCC 11 Search _____
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____ Courier _____

COVER LETTER

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

SUBJECT: Foreign Corporation Domesticating to Florida

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	\$ 78.75
Total filing fee	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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From: SAMLUT & COMPANY, PA

Name (printed or typed)

550 BILTMORE WAY, SUITE 200

Address

CORAL GABLES, FL 33134

City, State & Zip

(305) 461-9518

Daytime Telephone Number

CSAMLUT@SAMLUT.COM

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

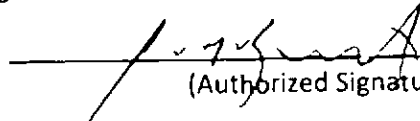
Articles of Domestication
Foreign Corporation Domesticating to Florida

The undersigned, DENNIS CROWLEY DIRECTOR
(Name) (Title)

of BLUE LAGOON ENTERPRISES LTD, a foreign
corporation, in accordance with s. 607.11922, Florida Statutes, submit these Articles of
Domestication.

1. Then name of the domesticating corporation is BLUE LAGOON ENTERPRISES LTD
(Foreign Corporation)
BRITISH VIRGIN ISLANDS.
2. The jurisdiction and date of its formation is BVI, 03/04/1998
3. The name of the domesticated corporation is _____
BLUE LAGOON ENTERPRISES CORP.
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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2022 FEB 11 PM 1:56
SEC-
TALLAHASSEE, FL

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

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

BLUE LAGOON ENTERPRISES CORP.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address
530 CHAMPION BLVD G6-272

BOCA RATON, FL 33496

Mailing Address
530 CHAMPION BLVD G6-272

BOCA RATON, FL 33496

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

REAL ESTATE

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 7500

ARTICLE VI REGISTERED AGENT AND STREET ADDRESS

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

YOUR CAPITAL CONNECTION, INC

417 E. VIRGINIA ST. STE 1.

TALLAHASSEE, FL 32301

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

02/09/2022

Date

ARTICLE V DIRECTORS AND/ OR OFFICERS

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

Name & Title: DENNIS CROWLEY (DIRECTOR)

Address: 530 CHAMPION BLVD G6-272

BOCA RATON, FL 33496

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

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

2/11/2022
Date

FILED
2022 FEB 11 PM 1:15
SECRET
TALLAHASSEE, FL