

P220000/8406

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entry Name)

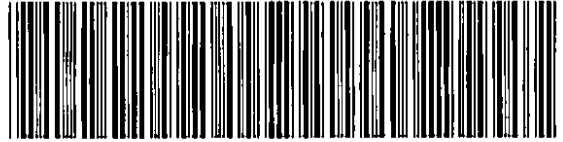
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600383278586

FILED
2022 MAR -8 AM 8:54
CLERK OF STATE
TALLAHASSEE, FL

2022 MAR -8 PM 3:32



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 9, 2022

CSC

SUBJECT: AUSTIN ATLANTIC INC
Ref. Number: W22000030656

RESUBMIT

Please give original
submission date as file date.

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

List the jurisdiction on #2 on the Articles of Domestication.

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 III

Letter Number: 122A00005616

RECEIVED
2022 MAR 10 AM 11:35
TALLAHASSEE, FLORIDA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 533382 7199649

AUTHORIZATION :



COST LIMIT : \$128.75

ORDER DATE : March 8, 2022

ORDER TIME : 1:46 PM

ORDER NO. : 533382-010

CUSTOMER NO: 7199649

DOMESTIC AMENDMENT FILING

NAME: AUSTIN ATLANTIC INC.

EFFECTIVE DATE:

ARTICLES OF AMENDMENT
XX RESTATED ARTICLES OF INCORPORATION/DOMESTICATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER'S INITIALS: _____

COVER LETTER

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

SUBJECT: Domestication of Austin Atlantic, Inc.

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:

Name (printed or typed)

Address

City, State & Zip

Daytime Telephone Number

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

FILED

Articles of Domestication
Foreign Corporation Domesticating to Florida

2022 MAR -8 AM 8:54

SECRETARY OF STATE
TALLAHASSEE, FL

The undersigned, Rodger D. Shay, Jr. President
(Name) (Title)

of Austin Atlantic, 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 Austin Atlantic, Inc.
(Foreign Corporation)

2. The jurisdiction and date of its formation is - Texas, February 19, 2016

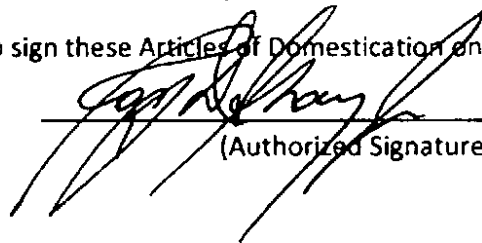
3. The name of the domesticated corporation is Austin Atlantic, Inc.

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)

FILED

2022 MAR -8 AM 8:54

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:

Austin Atlantic, Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

1 Alhambra Plaza

Suite 100

Coral Gables, FL 33134-5231

Mailing Address

1 Alhambra Plaza

Suite 100

Coral Gables, FL 33134-5231

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Any and all lawful purposes.

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 7,500

ARTICLE VI REGISTERED AGENT AND STREET ADDRESS

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

Cogency Global, Inc.

115 North Calhoun Street

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

Date

03/07/2022

ARTICLE V DIRECTORS AND/ OR OFFICERS

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

Name & Title: Rodger D. Shay Jr., President

Address: 1 Alhambra Plaza, Suite 100, Coral Gables, FL 33134

Name & Title: Aaron N. Rodriguez, Treasurer + Secretary

Address: 1 Alhambra Plaza, Suite 100, Coral Gables, FL 33134

Name & Title: Ryan E. Shay, Director

Address: 1 Alhambra Plaza, Suite 100, Coral Gables, FL 33134

Name & Title: Sean Kelleher, Director

Address: 1 Alhambra Plaza, Suite 100, Coral Gables, FL 33134

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

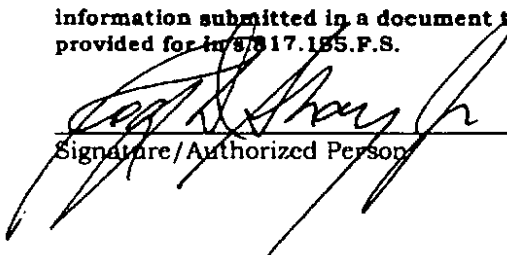
Name & Title: _____

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 § 817.155, F.S.


Signature/Authorized Person

03/07/2022
Date