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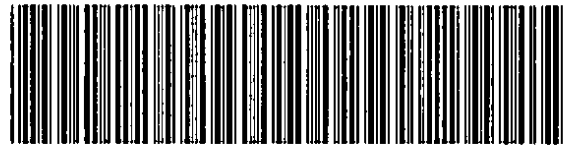
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TALLAHASSEE, FLORIDA

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## COVER LETTER

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

SUBJECT: Domestication Residential Plus Services 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	\$ 78.75
Total filing fee	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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**From:** Marta Lukawski

Name (printed or typed)

5213 Kensington Cir

Address

Coral Springs FL 33076

City, State & Zip

773-510 1335

Daytime Telephone Number

marta.olzak@gmail.com


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

Articles of Domestication  
Foreign Corporation Domesticating to Florida

The undersigned, Marta Lukawski, president  
(Name) (Title)  
of Residential Plus Services 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 Residential Plus Services Inc.  
(Foreign Corporation)
2. The jurisdiction and date of its formation is Illinois, June 2, 2016
3. The name of the domesticated corporation is Residential Plus Services 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.

 3/23/22  
(Authorized Signature)

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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

**ARTICLE I    NAME**

THE NAME OF THE CORPORATION SHALL BE:

Residential Plus Services Inc

**ARTICLE II    PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

Principal Address

Residential Plus Services Inc.

5213 Kensington Cir

Coral Springs, FL 33076

Mailing Address

Care of Marta Lukawski

5213 Kensington Cir

Coral Springs, FL 33076

**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: 1,000.00

**ARTICLE VI    REGISTERED AGENT AND STREET ADDRESS**

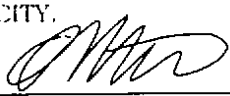
THE **NAME AND FLORIDA STREET ADDRESS** (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Marta Lukawski

5213 Kensington Cir

Coral Springs, FL 33076

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

03/23/2022

Date

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DIVISION OF CORPORATION  
TALLAHASSEE, FLORIDA

**ARTICLE V DIRECTORS AND/ OR OFFICERS**

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

Name & Title: Marta Lukawski president  
Address: 5213 Kensington Cir  
Coral Springs, FL 33076

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

03/23/2022  
\_\_\_\_\_  
Date