

P23000079249

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

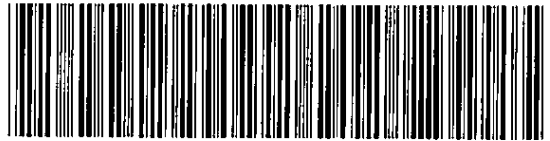
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/02/23--01008--006 **128.75

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CIT ASSISTANT

COVER LETTER

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

SUBJECT: Castellanos Associates, Inc. (After Florida Domestication: Castellanos Associates FL, 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:

InSight Law, PLLC

Name (printed or typed)

44365 Premier Plaza, Suite 200

Address

Ashburn, VA 20145

City, State & Zip

(703) 654-6019

Daytime Telephone Number

tmh@insightlaw.net

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

Articles of Domestication
Foreign Corporation Domesticating to Florida

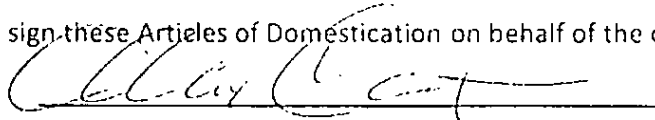
The undersigned, Alejandro Castellanos, President
(Name) (Title)
of Castellanos Associates, Inc., a foreign
corporation, in accordance with s. 607.11922, Florida Statutes, submit these Articles of
Domestication.

1. Then name of the domesticating corporation is Castellanos Associates, Inc.
(Foreign Corporation)

2. The jurisdiction and date of its formation is Virginia; formed 08/29/2000
3. The name of the domesticated corporation is Castellanos Associates FL, 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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FALL ARIASSER

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

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Castellanos Associates FL, Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

201 Ocean Reef Drive

Key Largo, Florida 33037

Mailing Address

201 Ocean Reef Drive

Key Largo, Florida 33037

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Any lawful purpose.

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 1000

ARTICLE VI REGISTERED AGENT AND STREET ADDRESS

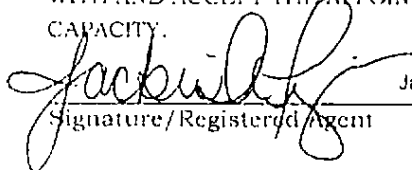
THE **NAME AND FLORIDA STREET ADDRESS** (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

InCorp Services, Inc.

3458 Lakeshore Drive

Tallahassee, FL 32312

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.



Jackie DeFilippis on behalf of InCorp Services, Inc

Signature/Registered Agent

9/20/2023
Date

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2023 OCT -2 PM 1:20
TALLAHASSEE, FL

ARTICLE V DIRECTORS AND/ OR OFFICERS

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

Name & Title: Alejandro Castellanos, President and Director

Address: 201 Ocean Reef Drive
Key Largo, Florida 33037

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

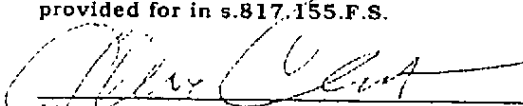
Name & Title: _____

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

9/11/2024
Date

FILED
2023 OCT -2 PM 1:20
CLERK OF THE
DEPARTMENT OF
STATE