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DEPARTMENT OF STATE
TALLAHASSEE, FL

2024 JAN -4 PM 12:40

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COVER LETTER

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

SUBJECT: Domestication of Sadala, inc. in FL from CA

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: William Mason

Name (printed or typed)

621 NE 2nd Ave. #4621

Address

Fort Lauderdale, FL 33304

City, State & Zip

7046098206

Daytime Telephone Number

will@sadala.co

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

Articles of Domestication
Foreign Corporation Domesticating to Florida

The undersigned, William Mason President/CEO
(Name) (Title)

of Sadala, 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 Sadala, inc.
(Foreign Corporation)

2. The jurisdiction and date of its formation is California, 4/4/2018

3. The name of the domesticated corporation is Sadala, 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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CLERK OF STATE
TALLAHASSEE, FL

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

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Sadala, inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

621 NE 2nd Ave

#4621

Fort Lauderdale, FL 33304

Mailing Address

621 NE 2nd Ave

#4621

Fort Lauderdale, FL 33304

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Technology consulting, innovation, artificial intelligence

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 100000

ARTICLE VI REGISTERED AGENT AND STREET ADDRESS

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

Registered Agents Inc.

7901 4th St N STE 300

St. Petersburg, FL 33702

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.

David Roberts
Signature/Registered Agent

12/29/2023
Date

SECRET
FALL MASSACHUSETTS
JAN 4 2024

2024 JAN -4 PM 12:40

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ARTICLE V DIRECTORS AND/ OR OFFICERS

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

Name & Title: William Mason, President and CEO

Address: _____

621 NE 2nd Ave #4621

Fort Lauderdale, FL 33304

Name & Title: William Mason, Director

Address: _____

621 NE 2nd Ave #4621

Fort Lauderdale, FL 33304

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: William Mason, Secretary

Address: _____

621 NE 2nd Ave #4621

Fort Lauderdale, FL 33304

Name & Title: William Mason, Treasury

Address: _____

621 NE 2nd Ave #4621

Fort Lauderdale, FL 33304

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

12/28/23

Date