# P24000034679

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## **COVER LETTER**

Department of State

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT:

Articles of Domestication 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

From:

Stacey Sard

Name (printed or typed)

320 Central Ave., Unit 207

Address

Sarasota, FL 34236

City, State & Zip

(630)747-7471

Daytime Telephone Number

stacey@ssidinc.com

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

# Articles of Domestication Foreign Corporation Domesticating to Florida

The u	<sub>ndersigned,</sub> Stacey Sard	President
	(Name)	(Title)
of S	S Interior Design, Inc.	, a foreign
corpo	ration, in accordance with s. 607.11922, Flori	
	stication.	
1.	Then name of the domesticating corporation	on is SS Interior Design, Inc.
		(Foreign Corporation)
2.	The jurisdiction and date of its formation is	Illinois 3/23/2017
3.		
4.	The jurisdiction of formation of the domest	icated corporation is <b>Florida</b>
5.	The domestication corporation is a foreign approved in accordance with its organic law	•
6.	Attached are Florida Articles of Incorporation requirements pursuant to s.607.0202, F.S.	on to complete the domestication
l certi	fy I am authorized to sign these Articles of Do	omestication on behalf of the corporation.  Survey  Orized Signature)

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

THE NAME OF THE CORPORATION SHALL	BE:	
SS Interior Design, Inc.		
ARTICLE II PRINCIPAL OFF	FICE	
THE PRINCIPAL PLACE OF BUSINESS/MAI	<del></del>	
Principal Address	Mailing Address	
320 Central Avenue	320 Central Avenue	
Unit 207	Unit 207	
Sarasota, FL 34236	Sarasota, FL 34236	
	ATION IS ORGANIZED: r which corporations may be incorporated under the Florida Business	
Corporation Act	<del></del>	
ARTICLE IV SHARES	1	
THE NUMBER OF SHARES OF STOCK IS:		
	D AGENT AND STREET ADDRESS	a kom ra .
THE NAME AND FLORIDA STREET ADDR	<b>LESS</b> (P.O. BOX <b>NOT</b> ACCEPTABLE) OF THE REGISTERED AGE	MUIS:
Stacey Sard		
320 Central Avenue, Unit 207	<del></del>	
Sarasota, FL 34236	<del></del>	
HAVING BEEN NAMED AS REGISTERE	D AGENT AND TO ACCEPT SERVICE OF PROCESS FOR TH	HE
	PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMIL	JAR
WITH AND ACCEPT THE APPOINTMENT CAPACITY.	AS REGISTERED AGENT AND AGREE TO ACT IN THIS	
San e d	Malad	
Signature/Registered Agent	Date	

# ARTICLE V DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES: Name & Title: Stacey Sard, President Name & Title: Stacey Sard, Director 320 Central Avenue 320 Central Avenue Address: Address: **Unit 207 Unit 207** Sarasota, FL 34236 Sarasota, FL 34236 Stacey Sard, Secretary Stacey Sard, Treasurer Name & Title: Name & Title: 320 Central Avenue 320 Central Avenue Address: Address: **Unit 207 Unit 207** Sarasota, FL 34236 Sarasota, FL 34236 Name & Title: \_\_\_\_\_\_ Name & Title: \_\_\_ Address: Address: Name & Title: Name & Title: Address: 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