

P24000056323

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

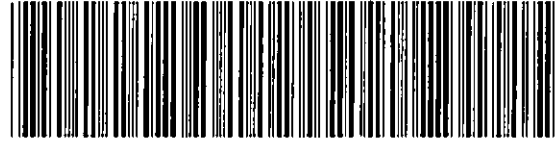
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2024 AUG -8 PM 4:10
CLERK OF STATE
TALLAHASSEE, FLORIDA

Articles of Domestication
Foreign Corporation Domesticating to Florida

The undersigned, Stephen R. Smith, President
(Name) (Title)

of The Steve Smith Group, 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 The Steve Smith Group, Inc.
(Foreign Corporation)

2. The jurisdiction and date of its formation is Virginia, November 15, 2019

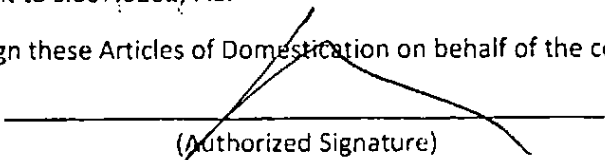
3. The name of the domesticated corporation is The Steve Smith Group, Inc.

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)

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

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

The Steve Smith Group, Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address
7640 SE Shenandoah Drive

Hobe Sound, FL 33455

Mailing Address
7640 SE Shenandoah Drive

Hobe Sound, FL 33455

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Insurance Sales

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 1000

ARTICLE VI REGISTERED AGENT AND STREET ADDRESS

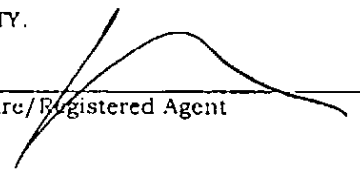
THE **NAME AND FLORIDA STREET ADDRESS** (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

7640 SE Shenandoah Drive

Hobe Sound, FL 33455

Stephen Smith

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

7/20/2024

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ATTORNEY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V DIRECTORS AND/ OR OFFICERS

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

Name & Title: Silvana Smith, President

Address: 7640 SE Shenandoah Drive

Hobe Sound, FL 33455

Name & Title: Stephen Smith, Vice President

Address: 7640 SE Shenandoah Drive

Hobe Sound, FL 33455

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 § 817.155.F.S.

Stephen Smith
Signature/Authorized Person

7/20/2024
Date

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CLERK OF STATE
TALLAHASSEE, FLORIDA