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FL
9-16-24

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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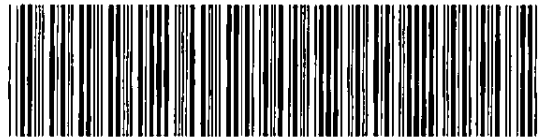
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE

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COVER LETTER

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

SUBJECT: FANCY PANTS STUDIO 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: WENDY HAMMOND

Name (printed or typed)

4924 NW 39TH LOOP

Address

OCALA, FL 34482

City, State & Zip

914-497-3931

Daytime Telephone Number

WENDY@FANCYPANTSSTUDIO.COM

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

Articles of Domestication
Foreign Corporation Domesticating to Florida

The undersigned, WENDY HAMMOND, PRESIDENT
(Name) (Title)

of FANCY PANTS STUDIO 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 FANCY PANTS STUDIO INC.
(Foreign Corporation)

2. The jurisdiction and date of its formation is NEW YORK 12/03/2010

3. The name of the domesticated corporation is FANCY PANTS STUDIO 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)

CLERK OF STATE
TALLAHASSEE, FL

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

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

FANCY PANTS STUDIO INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

Principal Address
WENDY HAMMOND

4924 NW 39TH LOOP

OCALA, FL 34482

Mailing Address
WENDY HAMMOND

4924 NW 39TH LOOP

OCALA, FL 34482

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 200

ARTICLE VI REGISTERED AGENT AND STREET ADDRESS

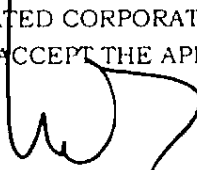
THE **NAME AND FLORIDA STREET ADDRESS** (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

WENDY HAMMOND

4924 NW 39TH LOOP

OCALA, FL 34482

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

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FLORIDA
STATE
2024 SEP -6 PM 4:23
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ARTICLE V DIRECTORS AND/ OR OFFICERS

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

Name & Title: WENDY HAMMOND, PRESIDENT

Address: 4924 NW LOOP

OCALA, FL 34482

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

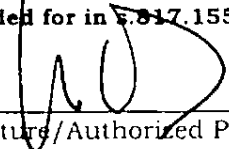
Name & Title: _____

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 § 817.155.F.S.



Signature/Authorized Person

Date

FILED

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CLERK OF STATE
TALLAHASSEE, FL