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T. BURCH JAN 29 2018

COVER LETTER

INVESTSHIRS Advisor Group INC

Enclose	ed is an original and one (1) copy of the Articles of Domestication and a circus.				
FEES:					
	Certificate of Domestication \$ 50.00 Articles of Incorporation and Certified Copy \$ 78.75				
	Total filing fee \$128.75				
<u>OPTIO</u>	NAL:				
	Certificate of Status \$ 8.75				
From: MichAEL J. Goggius					
701 Brickell Ave, Suite 1550					
	MIAMI FL 33/3/				
City, State & Zip					
	305 350 2100				
	Daytime Telephone Number				
	mgoggins pinvest shares. (om				
-	E-mail address: (to be used for future annual report notification)				

Department of State

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 2, 2018

INVESTSHARES ADVISOR GROUP INC. 701 BRICKELL AVE STE 1550 MIAMI, FL 33131

SUBJECT: INVESTSHARES ADVISOR GROUP INC.

Ref. Number: W18000020514

We have received your document for INVESTSHARES ADVISOR GROUP INC. and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

THE CERTIFICATE OF DOMESTICATION MUST BE SIGNED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Matthew T Moon Regulatory Specialist II

www.sunbiz.org

Letter Number: 718A00004263



January 29, 2018

INVESTSHARES ADVISOR GROUP INC. 701 BRICKELL AVE STE 1550 MIAMI, FL 33131

SUBJECT: INVESTSHARES ADVISOR GROUP INC.

Ref. Number: W18000008945

We have received your document for INVESTSHARES ADVISOR GROUP INC. and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Certificate of Domestication must be signed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 918A00001855

Tim Burch Regulatory Specialist III

60 1.1.1 1.1.2

www.sunbiz.org

	Articles of Domestication Foreign Corporation Domesticating to Florida
T	he undersigned, Michael J. Goggins President For The Constant of The Town of Twestshires Advisor Group Inc., a foreign
Ç	orporation, in accordance with s. 607.11922, Florida Statutes, submit these Articles of comestication.
	1. Then name of the domesticating corporation is <u>Twest Shares Advisor Group</u> Tuc (Foreign Corporation)
	2. The jurisdiction and date of its formation is Michigan 4-22-2013 3. The name of the domesticated corporation is <u>Twestshires Advisor Group</u> INC
	3. The name of the domesticated corporation is <u>InvestShires</u> Advisor Grap 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.
	certify I am authorized to sign these Articles of Domestication on behalf of the corporation.
	(Authorized Signature)

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

ARTICLE I NAME	
THE NAME OF THE CORPORATION SHALL BE:	_
Investshires Advisor	Group Inc.
ARTICLE II PRINCIPAL OFFICE	
THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDI	RESS IS:
Principal Address 701 Roickell Ave	Mailing Address
suite 1550	Sine
miAmi Fl 37131	
ARTICLE III PURPOSE THE PURPOSE FOR WHICH THE CORPORATION IS O A // PURPOSE // NUSE ARTICLE IV SHARES THE NUMBER OF SHARES OF STOCK IS:/00	
ARTICLE VI REGISTERED AGEN	IT AND STREET ADDRESS
THE NAME AND FLORIDA STREET ADDRESS (P.O.	. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:
1200 Brickell Bay Drive	
Apt 2101 minni Fl	<u>3</u> 3/3/
	AND TO ACCEPT SERVICE OF PROCESS FOR THE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR ISTERED AGENT AND AGREE TO ACT IN THIS
Signature/Registered Agent	Date

ARTICLE V DIRECTORS AND/ OR OFFICERS

	O ADDRESS(ES) AND SPECIFIC TITLES:			
Name & Title:	Michael Goggins /C	EO Name & Title:		
Address:	1200 Brick-11 Bay Dr	Address:	· · · · · · · · · · · · · · · · · · ·	
. •	1pt 2101			
	minni FL 33/31			
Name & Title:		Name & Title:		
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I submit this doc	cument and affirm that the facts stat	ed herein are true.	I am aware that false	
information sub- provided for in 5	mitted in a document to the Departm 817.159.F.S.	ent of State constit	itutes a third degree felony as	
Ta. A			1 12 202 1	
			1-15-5051	
Signature/Auth	0022 00 700 2010		· Date	