

P21000001988

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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W-2-894

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. BURCH
JAN 29 2018

W-2-894

COVER LETTER

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

SUBJECT: InvestShares Advisor Group 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 |
|-----------------------|---------|

From: MICHAEL J. Goggin
Name (printed or typed)
701 Brickell Ave, Suite 1550
Address
MIAMI FL 33131
City, State & Zip
305 350 2100
Daytime Telephone Number
mgoggin@investshares.com

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



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

Letter Number: 718A00004263



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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.

Tim Burch
Regulatory Specialist III

Letter Number: 918A00001855

RECEIVED
2018 FEB 26 PM 1:37
REGISTRATION DIVISION

Articles of Domestication
Foreign Corporation Domesticating to Florida

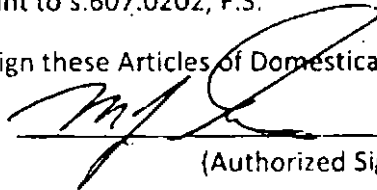
2021 JAN 11 PM 1:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

The undersigned, Michael J. Gaggins President
(Name) (Title)
of Investshares Advisor 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 Investshares Advisor Group Inc
(Foreign Corporation)
2. The jurisdiction and date of its formation is Michigan 4-22-2013
3. The name of the domesticated corporation is Investshares Advisor 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)

ARTICLE V DIRECTORS AND/ OR OFFICERS

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

Name & Title: Michael Giggins / CEO Name & Title: _____

Address: 1200 Brickell Bay Dr Address: _____
Apt 2101 _____
Miami FL 33131 _____

Name & Title: _____ Name & Title: _____

Address: _____ Address: _____

Name & Title: _____ Name & Title: _____

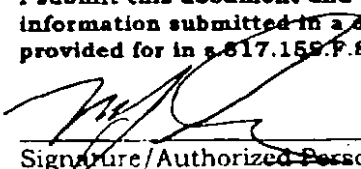
Address: _____ Address: _____

Name & Title: _____ Name & Title: _____

Address: _____ Address: _____

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2021 JAN 11 PM 1:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1-12-2021

Date