

P08000099388

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

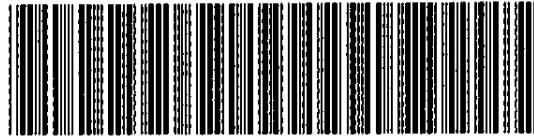
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**EXAMINER**



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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

Charter Number Only

11/5/08

SAMUEL SPENCER BIUM

Requestor's Name

Address

City State ZIP Phone

CORPORATION(S) NAME

COCO PLACE, LLC

L07000113083

VALIDATION ONLY

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- Profit
- NonProfit
- Foreign
- Limited Partnership
- Reinstatement
- Amendment
- Dissolution
- Annual Report
- Reservation
- Merger
- Mark
- Other
- Change of Registered Agent

- Certified Copy
- Photo Copies
- Certificate Under Seal

- Call When Ready
- Walk-In
- Will Wait
- Call If Problem
- Pick Up
- After 4:30
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Name
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W.P. Verifier

Empire Toll Free: 1-800-432-3028

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Coco Place, Inc.  
(Name of Resulting Florida Profit Corporation)

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

Joel K. Slater  
(Contact Person)

\_\_\_\_\_  
(Firm/Company)

243 West Sabal Palm Place  
(Address)

Longwood, Florida 32779  
(City, State and Zip Code)

For further information concerning this matter, please call:

Joel K. Slater at ( 407 ) 467-9225  
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$105.00 Filing Fees
- \$113.75 Filing Fees and Certificate of Status
- \$113.75 Filing Fees and Certified Copy
- \$122.50 Filing Fees, Certified Copy, and Certificate of Status

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

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TALLAHASSEE, FLORIDA

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SOUTH FLORIDA STATE  
TALLAHASSEE, FLORIDA

Certificate of Conversion  
For  
"Other Business Entity"  
Into  
Florida Profit Corporation

FILED  
08 NOV -6 PM 1:15  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following **"Other Business Entity"** into a **Florida Profit Corporation** in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

Coco Place, LLC

L07000113083

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a limited liability company  
(Enter entity type. Example: limited liability company, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of Florida  
(Enter state, or if a non-U.S. entity, the name of the country)

on November 7, 2007  
(Enter date "Other Business Entity" was first organized, formed or incorporated)

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

\_\_\_\_\_

4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:

Coco Place, Inc.

(Enter Name of Florida Profit Corporation)

5. If not effective on the date of filing, enter the effective date: \_\_\_\_\_  
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

Signed this 3 day of NW., 20 08.

**Required Signature for Florida Profit Corporation:**

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: [Signature]

Printed Name: Joel K. Slater Title: Director, Pres., Sec.

**Required Signature(s) on behalf of Other Business Entity:** [See below for required signature(s).]

Signature: [Signature]  
Printed Name: Joel K. Slater Title: manager

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**If Florida General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**If Florida Limited Liability Company:**

Signature of a Member or Authorized Representative.

**All others:**

Signature of an authorized person.

**Fees:**

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

Coco Place, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

243 West Sabal Palm Place, Longwood, Florida 32779

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

real estate investment

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Joel K. Slater, Director, President, Secretary  
243 West Sabal Palm Place  
Longwood, Florida 32779

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Samuel Spencer Blum, Esquire  
2666 Tigertail Avenue, Suite 106  
Coconut Grove, Florida 33133

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TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Joel K. Slater, 243 West Sabal Palm Place, Longwood, Florida 32779

\*\*\*\*\*

*Having been named as registered agent 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

  
\_\_\_\_\_  
Signature/Incorporator

11-3-08  
Date

10-15-08  
Date