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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

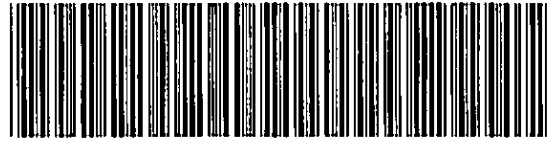
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SECRETARY OF STATE
FAIRFAX COUNTY, VA

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Accounting and Business Concepts, 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:

Katherine Lee Hyland Mercer
Contact Person

Accounting and Business Concepts, Inc.
Firm/Company

4195 South Tamiami Trail #150
Address

Venice, FL 34223
City, State and Zip Code

KHM@business-concepts.biz
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE
TALLAHASSEE, FL

For further information concerning this matter, please call:

Kate Hyland Mercer at () 941-480-1300
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:
New Filings Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
New Filings Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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

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:
Business Concepts, Inc.

Enter Name of Other Business Entity

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

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

on April 19, 2002
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**:
Accounting and Business Concepts, Inc.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: June 1, 2018

(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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TALLAHASSEE, FLORIDA

Signed this 30 day of May, 2018.

Required Signature for Florida Profit Corporation:

Katherine J. Hyland Mercer

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Katherine Hyland Mercer

Printed Name: Katherine Hyland Mercer Title: President & Chairman

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

Signature: *Katherine J. Hyland Mercer*

Printed Name: Katherine J. Hyland Mercer Title: President

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

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TALLAHASSEE, FLORIDA

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.

Katherine J. Hyland Mercer

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: Accounting and Business Concepts, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

Principal street address
The Brickyard Plaza
530 US HWY 41 Bypass South Unit 6B
Venice, FL 34285

Mailing address, if different is:
4195 South Tamiami Trail
#150
Venice, FL 34223

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

business consulting and bookkeeping services.

ARTICLE IV SHARES

The number of shares of stock is: 200,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Katherine L. Hyland Mercer, *President* Name and Title: _____

Address: 4195 South Tamiami Trail #150 Address: _____
Venice, FL 34223

Name and Title: Mark Mercer, *Sec.* Name and Title: _____

Address: 4195 South Tamiami Trail #150 Address: _____
Venice, FL 34223

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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TAMPA, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Katherine L. Hyland Mercer
Address: 4195 South Tamiami Trail #150
Venice, FL 34223

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Katherine L. Hyland Mercer
Address: 4195 South Tamiami Trail #150
Venice, FL 34223

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

Katherine L. Hyland Mercer 5-30-18
Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.

Katherine L. Hyland Mercer 5-30-18
Required Signature/Incorporator Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA