

N 1800000 2366

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

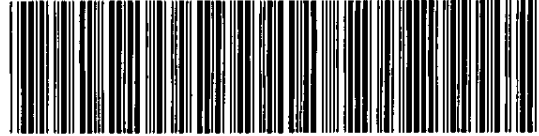
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

N. SAMS

MAR 05 2018



100310116371

03/06/18--01001--006 \*\*122.50

FILED

2018 MAR -5 PM 3:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
DEPARTMENT OF STATE

18 MAR -5 PM 3:18

COVER LETTER

TO: Charter Section  
Division of Corporations

SUBJECT: Friends Of The Hawk  
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:

David T. Hawkins  
Contact Person

Friends Of The Hawk  
Firm/Company

7680 Talley Ann Dr.  
Address

Tallahassee, FL 32311  
City, State and Zip Code

tesgt500e@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David T. Hawkins at ( 850 ) 294-9491  
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**

*non*

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.

*617*

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

Friends Of The Hawk, LLC

Enter Name of Other Business Entity

2. The "Other Business Entity" is a Limited Liability Company U5000005587  
(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 Florida  
(Enter state, or if a non-U.S. entity, the name of the country)

on \_\_\_\_\_  
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:

Florida

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

*non* Friends of the Hawk, Inc

Enter Name of Florida Profit Corporation

*non*

5. If not effective on the date of filing, enter the effective date: \_\_\_\_\_

(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.

FILED  
2010 MAR -5 PM 3:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Signed this 2<sup>nd</sup> day of March, 2020.

**Required Signature for Florida Profit Corporation:**

None

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

Incorporator: David T. Hawkins David T. Hawkins

Printed Name: David T. Hawkins Title: Owner

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

Signature: David T. Hawkins

Printed Name: David T. Hawkins Title: Owner

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)

FILED  
2020 MAR -5 PM 3:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be: Friends of The Hawk, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

7680 Talley Ann Dr.  
Tallahassee FL 32311

Mailing address, if different is:

7680 Talley Ann Dr.  
Tallahassee, FL 32311

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Charity. raising funds to PA on  
special events for local veterans that they can participate  
in for free, as well as helping other organizations.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: \_\_\_\_\_

As provided in the By Laws.

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

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

**FILED**  
**2010 MAR -5 PM 3:40**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: David T. Hawkins

Address: 7680 Talley Ann Dr.

Tallahassee, FL 32311

FILED  
2010 MAR -5 PM 3:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: David T. Hawkins

Address: 7680 Talley Ann Dr.

Tallahassee, FL 32311

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**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.

*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*

David T. Hawkins

Required Signature of Registered Agent

3-5-2020

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.*

David T. Hawkins

Required Signature of Incorporator

3-5-2020

Date