1800006666

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAN MAIL
(Business Entity Name)
(Documer t Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

M18ww352786

JUN 1 9 2018

T. SCOTT



100313813291

06/64/13--01027--028 **105.00

SECRETARY OF STATE

ATTN: Tyrone Scott

Tallahassee, FL 32301

FAX: 850-245-6804

COVER LETTER

	Charter Section Division of Corporations				
SUBJE	CT. Florida Viking Festival, Inc.				
30200		Resulting Flor	ida Profit	Corporation PROFIT	
	losed Certificate of Conversion, Articles into a "Florida Profit Corporation" in ac NON-PROFIT		tion, and fe	ces are submitted to convert an 15, F.S.	"Other Business
	eturn all correspondence concerning this		. . , .		
R. Miche	ele Phillips				
	Contact Person				
Florida V	Viking Festival, Inc.				
	Firm/Company				
1991 Sta	ate Road 60 E, #43				
	Address	· · · · · ·			
Valrico,	FL 33594				
	City, State and Zip Code	3			•
FloridaV	/ikingFestival@gmail.com				
E-	mail address: (to be used for future annu	al report noti	fication)		
For furt	her information concerning this matter,	please call:			÷
R. Mich	ele Phillips	at (340-1	862	
	Name of Contact Person	Area	a Code and	d Daytime Telephone Number	
Enclose	d is a check for the following amount:				
Periou	.00 Filing Fees S113.75 Filing Fees and Certificate of Status	□\$113.75 Fi and Certified		□\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
STREE New Fil Division Clifton	T ADDRESS: lings Section n of Corporations Building cecutive Center Circle		New F Division P. O. I	ING ADDRESS: Things Section on of Corporations Box 6327 assee, FL 32314	

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

NOW-PROFIT

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. 697.1415. Florida Statutes. NON-PROFIT 617,F.S. 1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: Florida Viking Festival, LLC Enter Name of Other Business Entity 2. The "Other Business Entity" is a ______ (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 _____ (Enter state, or if a non-U.S. entity, the name of the country) 5th September 2017 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: N/A NOW-PROFIT

4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u>: Florida Viking Festival, Inc. Enter Name of Florida Profit Corporation

Page 1 of 2

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

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be

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

listed as the document's effective date on the Department of State's records.

Department of State.)

ON JUN 15" PM 3: 06

Signed	thisday of	, 20	
	NOW - PROFIT ed Signature for Florida Profit Corporation:		
Incorpo	re of Chairman, Vice Chairman, Director, Office rator: Adichele Phillips Title: President		n selected, an
	ed Signature(s) on behalf of Other Business E		
Signatu	re X Sepchele Pullego		
Printed	Name:R. Michele Phillips	Title: President	
Signatu	re:		
Printed	Name:	_ Title:	
Signatu	re:		
Printed	Name:	_ Title:	
Signatu	re:		
Printed	Name:	Title:	
Signatu	re:		
Printed	Name:	Title:	
Signatu	тс:		
Printed	Name:	Title:	. •
	ida General Partnership or Limited Liability lare of one General Partner.	Partnership:	
	ida Limited Partnership or Limited Liability I res of <u>ALL</u> General Partners.	Limited Partnership:	
	ida Limited Liability Company: ure of a Member or Authorized Representative.		
All oth Signatu	ers: re of an authorized person.		
Fees:	Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	

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

ARTICLE II	PRINCIPAL OFFICE				
	Principal street address:	_	Mailing address, if different is:		
199	1 State Road 60 East	Sam	e		.
#43	· · · · · · · · · · · · · · · · · · ·				
Val	rico, FL 33594				
	II PURPOSE for which the corporation is organized is ge of the Viking Age through events to pro-	:	estival, Inc., is a historical preservation		
corporation i	is:				
carning: S	tudy of Viking Age history, culture, mart	rial arts;			
Educate: Ed	lucate through the sharing of Viking Age	history and heritage;			
Culture: Gre	ow a historical preservation community t	hrough fellowship and	volunteerism;		
URTICLE I	V MANNER OF ELECTION The o	nanner in which the dire	ctors are elected and appointed: Appoin	nted	
			ctors are elected and appointed:		
IRTICLE V	INITIAL OFFICERS AND/OR DIR R. Michele Phillips, President	RECTORS	Brent Feagans Treasurer	nied	
<i>RTICLE V</i>	INITIAL OFFICERS AND/OR DIR R. Michele Phillips, President	RECTORS Name and Title	Brent Feagans Treasurer		
I <i>RTICLE V</i>	INITIAL OFFICERS AND/OR DIR	RECTORS	Brent Feagans, Treasurer		
<i>RTICLE V</i>	itle: 1991 SR 60 E	RECTORS Name and Title	Brent Feagans, Treasurer 1991 SR 60 E		
RTICLE V	itle: 1991 SR 60 E #43 Valrico, FL 33594	Name and Title Address:	Brent Feagans, Treasurer 1991 SR 60 E #43 Valrico, FL 33594	-	
Name and To	itle: R. Michele Phillips, President 1991 SR 60 E #43 Valrico, FL 33594 Lou Mills Feagans, Secretary 1991 SR 60 E	Name and Title Address: Name and Title	Brent Feagans, Treasurer 1991 SR 60 E #43	-	
Name and To	itle: R. Michele Phillips, President 1991 SR 60 E #43 Valrico, FL 33594 Lou Mills Feagans, Secretary 1991 SR 60 E	Name and Title Address:	Brent Feagans, Treasurer 1991 SR 60 E #43 Valrico, FL 33594	-	
Name and T	itle: R. Michele Phillips, President 1991 SR 60 E #43 Valrico, FL 33594 Lou Mills Feagans, Secretary 1991 SR 60 E	Name and Title Address: Name and Title	Brent Feagans, Treasurer 1991 SR 60 E #43 Valrico, FL 33594		
Name and To	itle: R. Michele Phillips, President 1991 SR 60 E #43 Valrico, FL 33594 Lou Mills Feagans, Secretary 1991 SR 60 E #43 Valrico, FL 33594	Name and Title Address: Name and Title Address: Address:	Brent Feagans, Treasurer 1991 SR 60 E #43 Valrico, FL 33594	2018	
ARTICLE IV Name and T Address Name and T Address	itle: R. Michele Phillips, President 1991 SR 60 E #43 Valrico, FL 33594 Lou Mills Feagans, Secretary 1991 SR 60 E #43	Name and Title Address: Name and Title Address: Name and Title Address:	Brent Feagans, Treasurer 1991 SR 60 E #43 Valrico, FL 33594	2018 JUN 15	

Name and Title:_		Name and Title:	
Address		Address:	
			···
Name and Title:		Name and Title:	
			
Address		Address:	
_			·
			
ARTICLE VI	REGISTERED AGENT		
	orida street address (P.O. Box N	IOT acceptable) of the registered age	nt is:
Name:	R. Michele Phill	ips	
Address:	1991 SR 60 E, #	43	
1100000	Valrico, FL 335	94	
	· unito, 1 B 333		
ADTICL'S WIL	NGODDOD AMOD		
	INCORPORATOR dress of the Incorporator is:		
Name:	R. Michele Phill	ips	•
	1991 SR 60 E, #		
Address:	Valrico, FL 335		
	vanico, FL 33.		*
ARTICLE VIII	EFFECTIVE DATE: 05	7/29/2018 ₍₀₎	
	micr than the take of ming		TIONAL) ve days prior or 90 days after the filing.
•		The same control of the same o	ve days prior or 50 days after the fitting.
	inserted in this block does not m	eet the applicable statutory filing re-	nuirements, this date will not be listed as t
Note: If the date	inserted in this block does not m	eet the applicable statutory filing rea	quirements, this date will not be listed as t
Note: If the date document's effect	ive date on the Department of St	ate's records.	
Note: If the date document's effect Having been name	ive date on the Department of St ned as registered agent to accep	ate's records. t service of process for the above s	tated corporation at the place designated
Note: If the date document's effect Having been name	ive date on the Department of St ned as registered agent to accep	ate's records.	tated corporation at the place designated re to act in this capacity
Note: If the date document's effect Having been name	ive date on the Department of St ned as registered agent to accept smiliar with and accept the appa Lule Pulle	ate's records. t service of process for the above sintment as registered agent and agre	05/29/2018
Note: If the date document's effect Having been nam certificate, I am fa	ive date on the Department of Si ned as registered agent to accept smiliar with and accept the appa Lull Pully Required Signature of F	ate's records. t service of process for the above sintment as registered agent and agree cegistered Agent	tated corporation at the place designated see to act in this capacity 05/29/2018 Date
Note: If the date document's effect Having been nam certificate, I am fa	ted as registered agent to accept the apparatus with and accept the apparatus of Francisco Required Signature of Francis and affirm that the facts signature are also accept the apparatus and accept the apparatus accept the apparatus and accept the apparatus accept the a	ate's records. t service of process for the above sintment as registered agent and agree to the above service agent and agree to the agent agen	tated corporation at the place designated se to act in this capacity 05/29/2018 Date at any false information submitted in a do
Note: If the date document's effect Having been nam certificate, I am fa	ted as registered agent to accept the apparatus with and accept the apparatus of Francisco Required Signature of Francis and affirm that the facts signature are also accept the apparatus and accept the apparatus accept the apparatus and accept the apparatus accept the a	ate's records. t service of process for the above sintment as registered agent and agree cegistered Agent	tated corporation at the place designated se to act in this capacity 05/29/2018 Date at any false information submitted in a do-