

N19 000005906

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

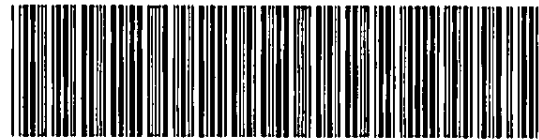
(Document Number)

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

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creativity form

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U.S. PATENT & TRADEMARK OFFICE  
WASHINGTON, D.C. 20503

creativity leaps

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** creative LEAPS, LLC

Name of Florida Limited Liability Company

The enclosed Articles of Conversion and fee(s) are submitted to convert a Florida Limited Liability Company" into an "Other Business Entity" in accordance with s.605.1045, F.S.

Please return all correspondence concerning this matter to:

**Marion Haase**

Contact Person

**creative LEAPS, LLC**

Firm/Company

**10312 Bloomindale Ave., Ste 108 PMB 171**

Address

**Riverview, FL 33578**

City, State and Zip Code

**info@creative-leaps.com**

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

For further information concerning this matter, please call:

**Marion Haase**

Name of Contact Person

at ( **713** ) **408-0597**

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee  
and Certificate of  
Status

☐ \$55.00 Filing Fee  
and Certified Copy

☒ \$60.00 Filing Fee,  
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

**Certificate of Conversion**  
For  
**"Other Business Entity"**  
Into  
**Florida Nonprofit Corporation**

This Certificate of Conversion **and attached Articles of Incorporation** are submitted to convert the following **"Other Business Entity"** into a **Florida Nonprofit Corporation** in accordance with s.617, F.S.

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

creativeLEAPS, LLC

2. The "Other Business Entity" is a limited liability company  
first organized, formed or incorporated under the laws of Florida on June 16th, 2015.
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
4. The name of the Florida Nonprofit Corporation as set forth in the **attached Articles of Incorporation**:

creativeLEAPS, Inc.

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

Signed this 12th day of April, 2019.

**Required Signature for Florida Nonprofit Corporation:**

Signature of Incorporator: \_\_\_\_\_

Printed Name: Marion Haase Title: President

**Required Signature(s) on behalf of Other Business Entity:**

Signature: \_\_\_\_\_

Printed Name: Marion Haase Title: Managing Partner

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CLERK OF COURT  
JANESVILLE, WISCONSIN

## ARTICLES OF INCORPORATION

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

### PREAMBLE

The undersigned citizens of the United States, desiring to form a not for profit corporation under the Florida Not For Profit Corporation Act, Chapter 617, Florida Statutes, certify and acknowledge the following:

#### ARTICLE I. NAME

The name of the corporation shall be: creative LEAPS, Inc.

#### ARTICLE II. PRINCIPAL STREET ADDRESS

The principal office and mailing address of the corporation shall be:

10312 Bloomingdale Ave., Ste 108, PMB 171  
Riverview, FL 33578

#### ARTICLE III. PURPOSE

The purpose for which the corporation is organized is: exclusively for charitable, scientific, and educational purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding provision of any future United States Internal Revenue Law.

The general nature of the objects and purposes of this corporation shall be that of a non-profit, non-partisan, and non-sectarian organization concerned with music therapy, creative arts therapy, integrated therapy, and wellness programs involving the arts. The corporation shall be entitled to perform all acts related to the achievement of the aforesaid objects and purposes shall have all of those powers permitted under the provisions of FLorida STatute Section 617, the terms of which are incorporated herein by reference.

Notwithstanding any other provision of these articles, this organization shall not carry on any activities not permitted to be carried on by an organization exempt from Federal Income tax under section 501(c)(3) of the Internal Revenue Code, or the corresponding provision of any future United States Internal Revenue Law.

No part of the net earnings of the organization shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the organization shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purpose set forth in the purpose clause hereof.

#### ARTICLE IV. MANNER OF ELECTION

The manner in which the directors are elected and appointed: The directors of the corporation shall be elected in accordance with methods and qualifications specified in the bylaws of the Corporation. In no event shall the number of directors be fewer than three.

#### ARTICLE V. INITIAL OFFICERS AND/OR DIRECTORS

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Name and Title: Marion Z Haase, President

Address: 10110 Somersby Dr.  
Riverview, FL 33578

Name and Title: Myles Dudley, Vice President

Address: 10110 Somersby Dr.  
Riverview, FL 33578

Name and Title: Chris Romeo, Treasurer

Address: 4011 51st Ave N  
St. Petersburg, FL 33714

Name and Title: Alex Montalvo, Secretary

Address: 8126 Stone Path Way  
Tampa, FL 33647

**ARTICLE VI. REGISTERED AGENT**

Name: Registered Agents Inc.

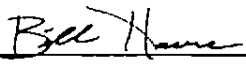
Address: 7901 4th St N, Ste 300  
St. Petersburg, FL 33702

**ARTICLE VII. INCORPORATOR**

Name: Marion Haase

Address: 10110 Somersby Dr.  
Riverview, FL 33578

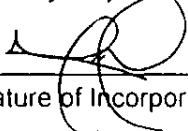
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
Required Signature of Registered Agent

4/10/2019

Date

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

  
Required Signature of Incorporator

4/10/2019  
Date

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TAMPA, FL 33602