

PO6000080043

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

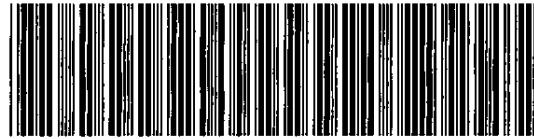
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300075277703

05/26/06--01018--024 \*\*113.75

FILED  
06 JUN 12 AM 10:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** S.T. Ventures, 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:

Gina Mongelli

(Contact Person)

Andrews & Company

(Firm/Company)

9836 W Sample Road

(Address)

Coral Springs, FL 33065

(City, State and Zip Code)

For further information concerning this matter, please call:

Gina Mongelli

(Name of Contact Person)

at ( 954 ) 752-8130

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 31, 2006

GINA MONGELLI  
ANDREWS & COMPANY  
9836 W SAMPLE ROAD  
CORAL SPRINGS, FL 33065

SUBJECT: S.T. VENTURES, LLC  
Ref. Number: W06000024934

We have received your document for S.T. VENTURES, LLC and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Certificate of Conversion must state the effective date of the conversion. The effective date cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date of the conversion under the laws governing the other business entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan  
Document Specialist

Letter Number: 006A00037770

**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:

S.T. Ventures, LLC      L04000057879

(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 August 04, 2004  
(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:**


S.T. Ventures, Inc.

(Enter Name of Florida Profit Corporation)

FILED  
06 JUN 12 AM 10:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.)

Signed this 15 day of May, 20 06.

Signature:   
(Must be signed by a Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator.)

Printed Name: Michael Thompson Title: President

**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  
06 JUN 12 AM 10:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

06 JUN 12 AM 10: 52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:

S.T. Ventures, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

8020 NW 51 Street  
Lauderhill, FL 33351

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawfull business.

**ARTICLE IV SHARES**

The number of shares of stock is:

500

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

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

Michael Thompson - President  
8020 NW 51 Street  
Lauderhill, FL 33351

**ARTICLE VI REGISTERED AGENT**

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

Michael Thompson  
8020 NW 51 Street  
Lauderhill, FL 33351

FILED

06 JUN 12 AM 10: 52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA.

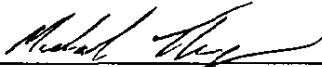
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Michael Thompson  
8020 NW 51 Street  
Lauderhill, FL 33351

\*\*\*\*\*

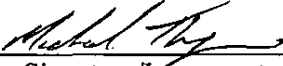
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*



Signature/Registered Agent

5/15/06

Date



Signature/Incorporator

5/15/06

Date