1000014270

| (Re | questor's Name) | |
|-------------------------|-------------------|------------------------|
| | | |
| (Ad | dress) | |
| , | • | |
| | dress) | |
| (Ad | aress) | |
| | | |
| (Cit | y/State/Zip/Phon | e #) |
| _ | | |
| PICK-UP | MAIT WAIT | MAIL |
| ` , | | |
| /D | siness Entity Na | mal |
| (Du | siness ⊏nuty ivai | me) |
| | | |
| (Do | cument Number | |
| | | |
| Certified Copies | Certificate | s of Status |
| ocitifica copies | _ Continuate | 3 Of Ctatus |
| | | |
| Special Instructions to | Filing Officer: | |
| • | • | |
| | | |
| | | |
| | | |
| | | |
| | | $\sim \lambda \propto$ |
| | | 17/1/2 |
| | | O(N) |
| - | | |
| | Office Use Or | A-7180 |
| | | - (1) |
| | | . 778° |
| • | · / | N/ ! |
| | (1 | <i>1</i> 1 |
| | 10 | • |
| | \ | |



000082983090

02/01/97--01009--001 **113.75

07 FEB -1 AM 9: 12

07 FEB - 1 AH 9: 07

COVER LETTER

| TO: Registration Division of C | | | • | • |
|--|--|---|---|---|
| SUBJECT: To | Name of Resulting | ng Florida Profit Corporati | | • |
| | | - | n, and fees are submitted attion" in accordance with | |
| Please return all cor | respondence concernin | g this matter to: | | |
| Joanna | (Contact Person) | ms.w | | |
| Joanna | Johaso ms. (Firm/Company) | e, Inc. | | |
| 2701 Cra | Address) | wy | SECRE TALLAH |) |
| Crawfordi | City, State and Zip Code) | 5232 | RETARY OF SAHASSEE, FL | |
| For further informat | ion concerning this ma | tter, please call: | 9: 12 STATI L'ORIC | • |
| Joana (Name of Co | Johnson ontact Person) | at (<u>850</u>) 9 (Area Code and Da | 26-4953 aytime Telephone Number) | - |
| Enclosed is a check | for the following amou | ınt: | | |
| \$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 ADDRES | SS: | MAILING A | ADDRESS: | |
| Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323 | tions ter Circle | Registration Division of O P. O. Box 63 Tallahassee, | Corporations 327 | |

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: |
|---|
| Joanna Johnson, Limited Liability Co. 205-1149 (Enter Name of Other Business Entity) |
| 2. The "Other Business Entity" is a 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 PER (Enter state, or if a non-U.S. entity, the name of the country) |
| on 1/28/2005 |
| (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: |
| <u>. </u> |
| 4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of</u> <u>Incorporation:</u> |
| Joanna Johnson, Inc. |
| (Enter Name of Florida Profit Corporation) |

| 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; <u>AND</u> 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is liste therein.) |
|---|
| Signed this day of , 20 07. |
| (Must be signed by a Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator.) Printed Name: Joang Johnson **Title: Pres: des+ |

Fees:

Certificate of Conversion: \$3 Fees for Florida Articles of Incorporation: \$7

Certified Copy:

Certificate of Status:

\$35.00

\$70.00

\$8.75 (Optional) \$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:

Joanna Johnson, Fr.C.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2701 Crawfordville Hwy #244 Crawfordville, FL, 32327

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and All Lawful business

ARTICLE IV SHARES

The number of shares of stock is:

1000

OTFEB SI AM 9: 12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Joanna Johnson, MSW - President

ARTICLE VI REGISTERED AGENT

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

Tanara Clark 4597 Autum Woods Way Tan Chassee, Fr. 32304

| ARTICLE VII INCORPORATOR | |
|---|----------|
| The <u>name and address</u> of the Incorporator is: | |
| Jama Johnson | |
| 2701. Cranfordulie Huy # 244 | |
| 2701. Cranfordulle Huy # 244 Cranfordulle El 32327 ********************************** | ******** |
| Having been named as registered agent to accept service of process for the above designated in this certificate, I am familiar with and accept the appointment as registed capacity | |
| Jamaia L Clark | 1-9-07 |
| Signature/Registered Agent | Date |
| Joanna Johnson | 1-9-07 |
| Signature/Incorporator | Date |

O7 FEB -1 AM 9: 12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA