

PO8 000066742

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

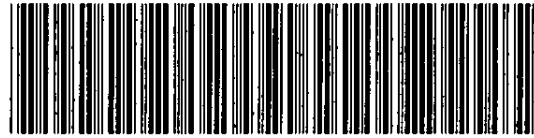
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE
JUL 15 2008
EXAMINER

Law Offices of Barry S. Grossman

319 South 17th Street
Suite 208
Omaha, Nebraska 68102
Phone (402) 345-5922
Fax (402) 345-7514
Email BGrossmanS@aol.com

July 9, 2008

Registration Section
Division of Corporations
P O Box 6327
Tallahassee FL 32314

Re: CMG Logistics, Inc.

Dear Sir/Madam:

Please find the enclosed the necessary paperwork along with a check for \$113.75 for filing fees and Certificate of Status to convert the above Nebraska corporation into a Florida corporation. If you have any questions, please contact this office.

Sincerely,


Barry S. Grossman

BSG;hs
Enclosures

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CMG Logistics, 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:

Barry S. Grossman

(Contact Person)

Law Offices of Barry S. Grossman

(Firm/Company)

319 So. 17th Street, #206

(Address)

Omaha, NE 68102

(City, State and Zip Code)

For further information concerning this matter, please call:

Barry S. Grossman

(Name of Contact Person)

at (402)

345-5922

(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

CMG Logistics, Inc.

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a corporation

(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 Nebraska

(Enter state, or if a non-U.S. entity, the name of the country)

on October 6, 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:

Florida (as a foreign corporation authorized to do business)

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

CMG Logistics, 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; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

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TALLAHASSEE, FLORIDA

Signed this 7 day of July, 2008.

Required Signature for Florida Profit Corporation:

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

Printed Name: Douglas Chapple Title: President

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

Signature: Douglas Chapple
Printed Name: Douglas Chapple Title: President

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)

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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:

CMG Logistics, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

560 Sebastian Square, St. Augustine, FL 32095

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

transportation and warehousing and any other legal business

ARTICLE IV SHARES

The number of shares of stock is:

2000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Douglas Chappelear, Director and President/Treasurer, 560 Sebastian Square, St. Augustine, FL 32095

Eleanor Chappelear, Director and Vice President/Secretary, 560 Sebastian Square, St. Augustine, FL 32095

ARTICLE VI REGISTERED AGENT

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

Douglas Chappelear, 560 Sebastian Square, St. Augustine, FL
32095


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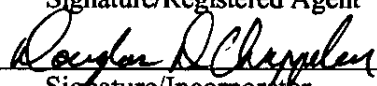
ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Barry S. Grossman, 319 So. 17th St., Ste. 206, Omaha, Nebraska
68102

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


Signature/Incorporator

6/21/08
Date
6-26-2008
Date

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TALLAHASSEE, FLORIDA