P09000001707

| (Re | equestor's Name) | |
|-------------------------|--------------------|--------------|
| (Ad | ldress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | · #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |

Office Use Only



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2009 JAH - S AH II:II

C. LEWIS

JAN 0 & 2009

EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations | | | | | |
|--|---------------------|------------------|---|---------|------|
| SUBJECT: MK'S Laws | N AND | MAII | YTENUNCE | SERVICE | /ric |
| (Name of Resu | lting Florida Profi | t Corporation | on) | | |
| The enclosed Certificate of Conversion, a convert an "Other Business Entity" into a 607.1115, F.S. | | | | | |
| Please return all correspondence concern | ing this matter | to: | | | |
| MIKE KLOPACK (Contact Person) | | | | | |
| (Contact Person) | | | | | |
| (Firm/Company) | | | | | |
| 1723 500 474 ST | REET | | | | |
| | | | | | |
| (City, State and Zip Code | | | | | |
| For further information concerning this n | natter, please c | all: | | | |
| (Name of Contact Person) | at (239 |) 2 | 143-5- | 796 | |
| (Name of Contact Person) | (Area C | ode and Da | ytime Telephone | Number) | |
| Enclosed is a check for the following am | ount: | | | | |
| \$105.00 Filing Fees \$\square\$ \$113.75 Filing Fees and Certificate of Status | | | ☐ \$122.50 Fili Certified Copy Certificate of S | , and | |
| STREET ADDRESS: | MA | MAILING ADDRESS: | | | |
| Registration Section Division of Corporations | | gistration l | Section Corporations | | |

P. O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

FILED

Certificate of Conversion
For

"Other Business Entity"
Into
Florida Profit Corporation

2009 JAN - 5 AM II: II
EECKETARY OF STATE
TALLAHASSEE, FLORIDA

This Certificate of Conversion <u>and attached Articles of Incorporation</u> 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: | | | | |
|---|--|--|--|--|
| MICHAEL J. KLOPACK DBA MK'S LAWN AND MAINTENANCE | | | | |
| (Enter Name of Other Business Entity) | | | | |
| 2. The "Other Business Entity" is a Sole Profession Ship (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 Accost 2004 (FILED 9/13/04) (Enter date "Other Business Entity" was first organized, formed or incorporated) | | | | |
| (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 <u>attached Articles of Incorporation:</u> | | | | |
| MKIS LAWN AND MAINTENANCE SERVICE INC. (Enter Name of Florida Profit Corporation) | | | | |
| (Enter Name of Florida Profit Corporation) | | | | |
| 5. If not effective on the date of filing, enter the effective date: JAN / 2009. (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 Z8 day of DECEMBER | , 20 <u>& &</u> . |
|--|--|
| Required Signature for Florida Profit Corporat | ion: |
| Single Action of Chairman Wind Chairman Director of | 000 |
| Signature of Chairman, Vice Chairman, Director C | Officer, or, if Directors or Officers have not |
| been selected, an Incorporator: | Danie and |
| Printed Name: MICHAEL KLOPACK Title: | MRESIDENI |
| Required Signature(s) on behalf of Other Business signature(s).] | s Entity: [See below for required |
| G: 1 | |
| Signature: Standard KLOFACK | Tille. |
| | |
| Signature: Printed Name: MICHAR KLOPACK | |
| Drinted Name: | Title: |
| Fillied Name Klopack | _ HucSecetary |
| Signature: | |
| Printed Name: | Title |
| Tuitos Haino. | |
| Signature: | |
| Printed Name: | |
| | |
| Signature: | |
| Signature:Printed Name: | Title: |
| | |
| Signature: | |
| Printed Name: | Title: |
| | |
| If Florida General Partnership or Limited Liabilit | ty Partnership: |
| Signature of one General Partner. | ty Partnership: |
| TOTAL CLUTTER CALLED A | |
| If Florida Limited Partnership or Limited Liabilit | y Limited Partnership: |
| Signatures of <u>ALL</u> General Partners. | \$50 S |
| If Florida Limited Liability Company: | |
| Signature of a Member or Authorized Representative | and the second s |
| Signature of a Member of Authorized Representative | |
| All others: | |
| Signature of an authorized person. | No. |
| | |
| 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) |
| - W 1445 WILL U. WILLIEW. | ~~~ (~ P*******) |

FILED

ARTICLES OF INCORPORATION

2009 JAN -5 AM 11: 11

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

SECRETARY OF STATE TALLAHASSES. FLORISA

ARTICLE I NAME

The name of the corporation shall be:

MK'S LAWN AND MAINTENANCE SERVICE INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address.is:

1723 SW 4TH STREET CAPE CORAL, FL 33991

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROVIDE GENERAL LAWN CARE SERVILE

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MICHAEL J KLOPACK 1723 3w 41th STREET, CAPE CORAL, F2, 33991 PRESIDENT, SECRETARY

REGISTERED AGENT

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

MICHAEL J. KLOPACK 1723 SW 4/TH STREET CAPE CONAL FL 33991

FILED

2009 JAN -5 AM 11: 11

| SECRETARY OF STATE FALLAHASSEE, PLORIDA |
|---|
| |
| |
| |
| |
| ess for the above stated corporation at the place intment as registered agent and agree to act in this |
| |
| 12/28/08 |
| Date |
| |
| |