

PD9000085735

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

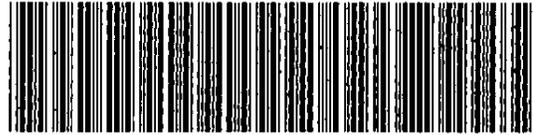
(Business Entity Name)

(Document Number)

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

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FILED  
2009 OCT 16 AM 10:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS

OCT 19 2009

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** M & J Business -Office Furniture Plus, 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:

Mark Earle

Contact Person

M & J Business Office- Furniture Plus, Inc.

Firm/Company

3119 Indian Trail

Address

Lake Worth, FL 33462

City, State and Zip Code

mjinstallplus@bellsouth.net

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

For further information concerning this matter, please call:

Mark Earle

Name of Contact Person

at ( 954 )

Area Code and Daytime Telephone Number

793-0285

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

Certificate of Conversion  
For  
"Other Business Entity"  
Into  
Florida Profit Corporation

FILED  
2009 OCT 16 AM 10:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

M & J Business Office Furniture Plus, LC

Enter Name of Other Business Entity

L06000020292

2. The "Other Business Entity" is a Limited Liability Company  
(Enter entity type. Example: limited liability company, limited partnership,  
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 02/24/2006  
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:

n/a

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

M & J Business- Office Furniture Plus, 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.)

Signed this 14 day of October, 2009.

FILED

**Required Signature for Florida Profit Corporation:**

2009 OCT 16 AM 10:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Printed Name: Mark Earle Title: Secretary/Treasurer

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

Signature: [Signature]

Printed Name: Mark Earle Title: Manager

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)

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

**FILED**  
2009 OCT 16 AM 10:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

**M & J Business-Office Furniture Plus, Inc.**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

3119 Indian Trail  
Lake Worth, FL 33462

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The corporation is organized for the purpose of engaging in any activity or business permitted under the laws of the United States and the State of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is:

The maximum number of shares of stock that the corporation is authorized to have outstanding at any one time is 1,000 share of common stock having a par value of \$.01 per share.

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

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

Joel Josephs, 3119 Indian Trail, Lake Worth, FL - President  
Frank T. Allen, 3119 Indian Trail, Lake Worth, FL - V. President  
Mark Earle, 3119 Indian Trail, Lake Worth, FL -Secretary/Treasurer

**ARTICLE VI REGISTERED AGENT**

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

Mark Earle,  
3119 Indian Trail  
Lake Worth, FL 33462

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Mark Earle  
3119 Indian Trail  
Lake Worth, FL 33462

\*\*\*\*\*

*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

10 14 09  
\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature/Incorporator

10 14 09  
\_\_\_\_\_  
Date