P09000103000

(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



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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

J. BRYAN

DEC 2 9 2009

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	ECT: TRIPLE M ENTERPR	ISES LETNC ing Florida Profit Corpor	ation
conve	nclosed Certificate of Conversion, A rt an "Other Business Entity" into a 115, F.S.	articles of Incorporati	on, and fees are submitted to
Please	return all correspondence concerni	ng this matter to:	
	MONA S. GODARD		
	Contact Person		
	TRIPLE M ENTERPRISES	SLLC	09 DEC 28 PM 1: 02 SECRETARY OF STATE TALLAHASSEE. FLORID
	Firm/Company		HATA
	444 S MAGNOLIA AVI	E	B PR
	Address		FEST
· ,.	MELBOURNE, FL 32935- City, State and Zip Code	6346	OZ DRIDA
•	City, State and Zip Code		
	MSGODARD@AOL.CO	M	
E-	-mail address: (to be used for future annual	report notification)	
For fu	rther information concerning this m	atter, please call:	
	MONA S. GODARD	at (321)_	242-4825
	Name of Contact Person	Area Code and D	aytime Telephone Number
Enclos	sed is a check for the following amo	ount:	
√] \$10.	5.00 Filing Fees \$\int_{\text{and Certificate of}}\$113.75 Filing Fees and Certificate of Status	\$113.75 Filing Fee and Certified Copy	S 122.50 Filing Fees, Certified Copy, and Certificate of Status
Regist Divisi Clifto 2661	tration Section on of Corporations n Building Executive Center Circle nassee, FL 32301	Registration Division of P. O. Box	G ADDRESS: on Section of Corporations 6327 ee, FL 32314

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



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:
TRIPLE M ENTERPRISES LLC # L09000067351
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, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws ofFLORIDA
(Enter state, or if a non-U.S. entity, the name of the country)
on 07/13/2009 .
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 <u>attached Articles of Incorporation:</u>
TRIPLE M ENTERPRISES 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 listed therein.)

Signed this 21 day of DECEME	BER , 20 09	 •					
Required Signature for Florida Profit Corporation:							
Signature of Chairman, Vice Chairman, Director, Cobeen selected, an Incorporator: Printed Name: MONA S. GODARD Title:	Officer, or if Directors or or officer, or if Directors or if Directors or or if Directors	icers have not					
Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]							
Signature: MONA S. GODARD	Title: MGRM						
Signature:Printed Name:	Title:						
Signature:Printed Name:	_Title:						
Signature:Printed Name:	Title:	SEGRETA SEGRETA					
Signature: Printed Name:		28 PH					
Signature:Printed Name:	_Title:	1:0					
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: Fees for Florida Articles of Incorporation: 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:

TRIPLE M ENTERPRISES INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

444 S MAGNOLIA AVE MELBOURNE, FL 32935-6346

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
ENGAGE IN ANY AND ALL LAWFUL BUSINESS:

ARTICLE IV SHARES

The number of shares of stock is:

100

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SECRETARY OF STATE

SECRETARY SEE FLORIDA

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ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MONA S. GODARD, 3439 QUAIL CT, MELBOURNE, FL 32935-4708 - PRESIDENT MICHAEL B. GODARD, 444 S. MAGNOLIA AVE, MELBOURNE FL 32935-6346- VICE PRESIDENT

MARY S. CURRAN, 7135 A1A-C, MELBOURNE BEACH, FL 32951 - SECRETARY

ARTICLE VI REGISTERED AGENT

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

MONA S. GODARD 3439 QUAIL CT MELBOURNE, FL 32935-4708

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

MONA S. GODARD 3439 QUAIL CT

MELBOURNE, FL 35935-4708

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

12/21/2009 <u>12/21/2009</u>

Date

12/21/2009

Date