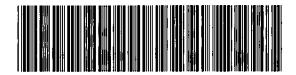
## 

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT 1	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Special Instructions to Filing Officer:	·
A. LUNT	
JAN 12 2010	
EXAMINER	
Office Use Only	



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DID JAN II AH IQ: 36 SECRETARY OF STATE



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 11, 2009

IVAN MCPHEE 2110 SW 56TH AVE. WEST PARK, FL 33023

SUBJECT: I MACK TOWING CO., INC.

Ref. Number: W09000053959

We have received your document for I MACK TOWING CO., INC. and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 608.4403, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by a member or an authorized representative of a member. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Letter Number: 009A00037853

Agnes Lunt Regulatory Specialist II

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: I MACK TOWN Name of Resulting	Florida Profit Corporation
·	icles of Incorporation, and fees are submitted to Florida Profit Corporation" in accordance with s.
Please return all correspondence concerning	this matter to:
EDD WAIISR'	
TMACKTOWING CO, Firm/Company	LAHAS
2110 Sw 56th AVE	2010 JAN II AM 10: 38 SECRETARY OF STATE TALLAHASSEE, FLORIDA
WEST PARK, 1-L 332 City, State and Zip Code	2,23 38 2,23
E-mail address: (to be used for future annual rep	port notification)
For further information concerning this matter	er, please call:
Name of Contact Person	at ( <u>786</u> ) <u>325-7231</u> Area Code and Daytime Telephone Number
Enclosed is a check for the following amoun	ıt:
\$105.00 Filing Fees X\$113.75 Filing Fees And Certificate of Status	\$113.75 Filing Fees and Certified Copy 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

# FILED

#### **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.

of Conversion is:	ate
T MACK TOWING CO, LLC Em	2010
Enter Name of Other Business Entity	AM
2. The "Other Business Entity" is a	AM W: 38
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:	r
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u> I MACK TOUR WG CO. I NC	
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 list therein.)	

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Signed this day of	FL., 2009
Required Signature for Florida Profit Corporat	ion:
Signature of Chairman, Vice Chairman, Director, Cobeen selected, an Incorporator Title:	Officer, or, if Directors or Officers have not
Required Signature(s) on behalf of Other Business signature(s).]	s Entity: [See below for required
Signature: TWAN MSPHEE	Title: OWNER CHAIRMAS
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	_ Title:
Signature:Printed Name:	
Signature:Printed Name:	Title:
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	ÖÄ ω
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)

The name of the corporation shall be: I MIACK TOWING CO, INIC.	
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  \$\frac{2110}{0.0000} \times \times \frac{4}{0.0000} \times \frac{4}{0.00000} \times \frac{4}{0.00000} \times \frac{4}{0.00000} \times \frac{4}{0.000000} \times \frac{4}{0.0000000000000000000000000000000000	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is: ANY AND ACC LEGAL J.	Functions
ARTICLE IV SHARES The number of shares of stock is: (100) ONE HONDREAD	2010 JAN I I AH IO: 3 SECRETARY OF STATE TALLAHASSEE, FLORIC
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(cs) and specific title(s):  IVANI MIC PHETE, OWNER/CHAIRMAN  7 NIE 91St Street  MINIMI SHOKE, FC, 33138	I AH IO: 38 RY OF STATE SEE, FLORIDA
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  IVAN MICHEE  7 NEGISTERET  MIAMI, SHOKES, I-C 33138	
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  IVAN MC. PHEE  7 NE 9155 + reet  777771, 5 HORES, FL 33138  *********************************	
designated in this certificate, I am familiar with and accept the appointment as registered agent and a capacity    12/1/2   Signature/Registered Agent   Date	-

Signature/Incorporator