

P1000008874

(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:

L07-96563

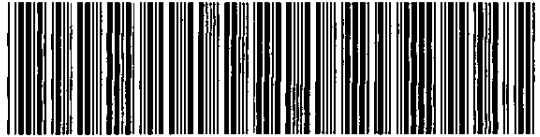
W1-2228

**A. LUNT**

JAN 29 2010

**EXAMINER**

Office Use Only



800166076678

01/14/10--01041--016 \*\*105.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010 JAN 28 PM 4:03

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 15, 2010

HARRY BRIDGES  
27221 STATE ROAD 56 SUITE 160  
WESLEY CHAPEL, FL 33544

SUBJECT: I N F INTERVAL MANAGEMENT INC.  
Ref. Number: W10000002228

We have received your document for I N F INTERVAL MANAGEMENT INC. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name in line one of the conversion needs to be the LLC name not the corporation name. Article IV of the articles of incorporation must be a specific number not 1 or more.,

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.

Agnes Lunt  
Regulatory Specialist II

Letter Number: 410A00001281

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** INF Internal Management 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:

Harry Bridgers  
Contact Person

INF internal Management.  
Firm/Company

27221 State Road 56 Suite 1600  
Address

Wesley Chapel, FL 33544  
City, State and Zip Code

info@internalmanagement.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Harry Bridgers at (816) 516-3341  
Name of Contact Person 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

2010 JAN 28 PM 4:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**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:

INF interval management L.L.C.  
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 of Florida  
(Enter state, or if a non-U.S. entity, the name of the country)

on Sept 20, 2007  
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

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

INF Interval Management 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.)

2010 JAN 28 PM 4:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

Signed this 7 day of January, 20 10.

**Required Signature for Florida Profit Corporation:**

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

Printed Name: Gina Perkins Title: Chairman

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

Signature: Gina Perkins

Printed Name: Gina Perkins Title: Chairman

Signature: Harry Bridges / Harry Bridges

Printed Name: Harry Bridges Title: Director

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)

2010 JAN 28 PM 4:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**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:

INF Interval Management INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

27604 Cashford Circle  
Wesley Chapel, FL 33544

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful Businesses.

**ARTICLE IV SHARES**

The number of shares of stock is:

100

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

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

(P) JINA PERKYNS  
(D) HARRY BRIDGERS

**ARTICLE VI REGISTERED AGENT**

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

Harry Bridgers  
27221 Slate Road SE  
Wesley Chapel, FL 33544

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

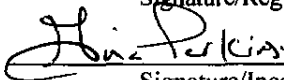
615 Sable Palms, Apt 2  
Altamonte Springs, FL 32701

\*\*\*\*\*

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



Date

JAN 11, 2010

Date

2010 JAN 28 PM 4: 03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED