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(Requestor's Name)		
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(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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SECRETARY OF STATE
VALLAMASSEE FROME.

S. HAWKES

MAY 0 3 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 5, 2010

JEAN WORDEN 8612 FANTASIA PARK WAY RIVERVIEW, FL 33578

SUBJECT: DOWD DEVELOPMENT INC.

Ref. Number: W10000021818

We have received your document for DOWD DEVELOPMENT 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 attached form must be completed in order to file the document.

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) 245-6955.

Letter Number: 810A00011191

Suzanne Hawkes Regulatory Specialist II

www.sunbiz.org





RAINBOW ACCOUNTING & TAX SERVICE, INC.

ACCOUNTING SPECIALISTS 8612 Fantasia Park Way Riverview, FL 33569 (813) 671-5929 Fax (813) 671-3629

April 28.2018. Olease file Shis form for us We are Changing from an LLC to TNC Marge as follows DOWD Development Dows Development TNC any Questions, Please Call us/ un Wollen

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Down Development Jac 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:
Jean Warden Contact Person Rain Law Acc + Jax Service Inc. Firm/Company
86/2 Funtasia PARK WAY
Rivirvitu FL. 33578 City, State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tean Worder at (8/3) 67/- 5929 Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
\$105.00 Filing Fees
STREET ADDRESS:MAILING ADDRESS:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsClifton BuildingP. O. Box 63272661 Executive Center CircleTallahassee, FL 32314

Tallahassee, FL 32301

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: Development LLC
Enter Name of Other Business Entity 2. The "Other Business Entity" is a _____ (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) 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 attached Articles of **Incorporation:**

5. If not effective on the date of filing, enter the effective date: 400 (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.)

Enter Name of Florida Profit Corporation

Signed this _ 28 day of April	, 20 <u>/0</u> .	
Required Signature for Florida Profit Corporation:		
Signature of Chairman, Vice Chairman, Director Seen selected, an Incorporator: Printed Name: Steven L. Dows Title:	Officer, or, if Directors or Officers have not	
Signature of Chairman, Vice Chairman, Director Officer, or, if Directors or Officers have not been selected, an Incorporator: Printed Name: Steven L. Dows Title: Pecsisent Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).] Signature: Printed Name: Steven A. Dows Title: Incertox Journal of Signature: Printed Name: Title: Ti		
Signature: Steven A. Dowb	_ Title: [Inector /owners &	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:		
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: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$ 8.75 (Optional) \$ 8.75 (Optional)	

'AR'TICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

DOWD DEVELOPMENT INC

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

1005 RAVENWOOD DR

C/O STEVEN A. DOWD 🛅

VALRICO, FL 33594

PO BOX 2617

BRANDON, FL 33509

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ALL LAWFUL BUSINESS



+

<u>ARTICLE IV SHARES</u>

The number of shares of stock is:

1000 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

STEVEN A.

DOWD

1005

VALRICO

FL

33594

RAVENWOOD

DRIVE

ARTICLE VI REGISTERED AGENT

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

STEVEN A. DOWD

1005 RAVENWOOD DRIVE

VALRICO, FL 33594

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

STEVEN A. DOWD

1005 RAVENWOOD DRIVE

VALRICO, FL 33594

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

04/28/2010

Date

04/28/2010

Date