

P10000065374

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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PICK-UP

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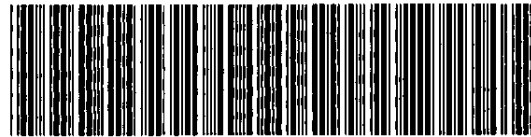
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2010 AUG 10 AM 9:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

AUG 11 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OPS Management Group, 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:

Felipe D. Burgos
Contact Person

OPS Management Group
Firm/Company

13506 Summerport Village Pkwy #241
Address

WINDERMERE, FL 34786
City, State and Zip Code

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

For further information concerning this matter, please call:

Felipe Burgos at (407) 374-9344
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 5, 2010

FELIPE O. BURGOS
OPS MANAGEMENT GROUP
13506 SUMMERPORT VILLAGE PKWY, #241
WINDERMERE, FL 34786

SUBJECT: OPS MANAGEMENT GROUP, INC.
Ref. Number: W10000036810

We have received your document for OPS MANAGEMENT GROUP, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 410A00018871

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

FILED

2010 AUG 10 AM 9:47

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:

OPS MANAGEMENT GROUP, LLC

Enter Name of Other Business Entity

L09000020805

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 NORTH CAROLINA
(Enter state, or if a non-U.S. entity, the name of the country)

on FEBRUARY 15, 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:

FLORIDA

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

OPS MANAGEMENT GROUP, 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 1 day of AUGUST, 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: _____

Printed Name: FELIPE O BURGOS Title: CHAIRMAN

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

Signature: _____
Printed Name: FELIPE O BURGOS Title: MGRM

Signature: _____
Printed Name: _____ Title: _____

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) |

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:

OPS MANAGEMENT GROUP, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Business Address - 14117 Oasis Cove Blvd Suite 302 Windermere, FL 34786

Mailing Address - 13506 Summerport Village Pkwy Suite #241 Windermere, FL 34786

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

BUSINESS MANAGEMENT

ARTICLE IV SHARES

The number of shares of stock is:

1500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Felipe O Burgos - Chairman - 14117 Oasis Cove Blvd Suite 302 Windermere, FL 34786

Felipe Burgos Rivera - Vice Chairman - 14117 Oasis Cove Blvd Suite 302 Windermere, FL 34786

ARTICLE VI REGISTERED AGENT

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

Felipe O Burgos - Chairman - 14117 Oasis Cove Blvd Suite 302 Windermere, FL 34786

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Felipe O Burgos - Chairman - 14117 Oasis Cove Blvd Suite 302 Windermere, FL 34786

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

AUGUST 1, 2010

Date

AUGUST 1, 2010

Date

FILED
10 AUG 10 AM 9:47
TALLAHASSEE, FLORIDA
SECRETARY OF STATE