P1000082439

(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:		

G. MCLEOD

OCT 11 2010

EXAMINER



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SECRETARY OF STATE
TALLAHASSEE, FLORID.

COVER LETTER

TO: Registration Section Division of Corporations

Division of Corporations				
SUBJECT: MANHATTAN FINANCE COMPANY Nome of Resulting Florida Profit Company				
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:				
Alina Chamberlain Contact Person				
MANNAHAN FINANCE COMPANY Firm/Company				
6391 49th St N. Address				
Pinellas PARK FL 33781 City, State and Zip Code				
VASELOVO YOWO- COM. E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Mina Chamberlain at (727) 492-5574 Name of Contact Person Area Code and Daytime Telephone Number				
Enclosed is a check for the following amount:				
\$105.00 Filing Fees and Certificate of Status \$\begin{array}{c} \D\$\$113.75 Filing Fees and Certified Copy Status \$\begin{array}{c} \D\$\$113.75 Filing Fees and Certified Copy and Certificate of Status \$\begin{array}{c} \D\$\$113.75 Filing Fees and Certified Copy and Certificate of Status				
STREET ADDRESS:MAILING ADDRESS:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsClifton BuildingP. O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301				

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:					
MAN hattan FINANCE COMPANY, LLC L100001035 Enter Name of Other Business Entity					
Enter Name of Other Business Entity					
2. The "Other Business Entity" is a 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 10/04/2010 Enter date "Other Business Entity" was first organized, formed or incorporated.					
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: NONE					
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:					
MANHATTAN FINCANCE COMBANY					
MANHATTAN FINANCE COMPANY Enter Name of Florida Profit Corporation					
·					
5. If not effective on the date of filing, enter the effective date: ASAP.					
(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.)					
6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting the					

Page 1 of 2

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

conversion.

currently organized, formed or incorporated.

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Signed this 06 day of October	, 20_ <i></i> .			
Required Signature for Florida Profit Corporate Individual signing affirms that the facts stated in the a third degree felony as provided for in s.817.155, leading to the second state of the second	is document are true. Any false information constitutes			
Signature of Chairman, Vice Chairman, Director, Coselected, an Incorporator: Printed Name: Alian CHAMBERLANTitle:	Officer, or, if Directors or Officers have not been			
Required Signature(s) on behalf of Other Business Entity: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).]				
Signature: AliNo Chambulain	Title: MGRM			
Signature:Printed Name:				
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)			

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: MANHATTAN FIRE	NANCE COMPANY	
ARTICLE II PRINCIPAL OFFICE Principal street address 639 49th St. N DINEMAS PARK, FL 3378	Mailing address, if different is:	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSIN	1835	
ARTICLE IV SHARES The number of shares of stock is:		
ARTICLE V INITIAL OFFICERS AND/OR DIRECTOR Name and Title: ALINA CHAMBERLAIN Address: 10265 GANDY SLV # 903 St. Fetersburg. FL 33702	Name and Title: Address:	
Name and Title:	4.11	
Name and Title: Address:		
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of Name: ALINA CHAMBERLAIN Address: [0265 GANN Blvd # 903 St. Petersburg, FL 33702	the registered agent is:	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: ALINA Chamberlain Address: ALINA Chamberlain Address: Letersburg: FL 33702	- -	
Having been named as registered agent to accept service of process this certificate, I am familiar with and accept the appointment as registered.	stered agent and agree to act in this capacity	
Required Signature/Registered Agent		
I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.		
Required Signature/Incorporator		