P10000089907

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Boodine Namber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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EXAMINER

COVER LETTER

TO:	Registration : Division of C						
SURI	тст∙ LEADE	R & LEADER, PA					
50 В	BC1		Resulting Florida Profit Co	orporation			
				n, and fees are submitte ccordance with s. 607.1			.n
Please	return all corr	espondence concernin	g this matter to:				
МІСН	AEL D. LEAI	DER					
		Contact Person					
LEAD	ER & LEADE	R, PA f/k/a LEADER	& LEADER, PL				
		Firm/Company					
633 S	OUTH ANDR	EWS AVENUE; SUI	TE 201				
		Address		,			
FOR	LAUDERDA	ALE, FLORIDA 333	01				
	C	City, State and Zip Code		,	است داست حلند	<u> </u>	
MLE.	ADER@LEA	DER-LAW.COM be used for future annual i	report notification)			AON GHIZ	कानसङ्ख् इं
		on concerning this ma				-	interest
MICH	AEL D. LEADI	ER	at (954) 52	3-2020	- 15 mg		
	Name of Cor	tact Person		time Telephone Number	22	20	¥., .
Enclos	sed is a check t	for the following amou	int:)γ ΕΠ (μ)	ه٠	
5 10.	5.00 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			
Regist Divisi	ET ADDRES ration Section on of Corporat Building		Registration	Corporations			

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, 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:	
LEADER & LEADER, PL U1-34410	
Enter Name of Other Business Entity	
2. The "Other Business Entity" is a FLORIDA PROFESSIONAL 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 THE STATE OF FLORIDA (Enter state, or if a non-U.S. entity, the name of the country)	
on_MARCH 29, 2007	TUN.
Enter date "Other Business Entity" was first organized, formed or incorporated	*1903 (M146)
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:	
N/A S	
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:	
LEADER & LEADER, PL	
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.)	;
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 conversion.	
7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is	

currently organized, formed or incorporated.

Signed t	his <u>1</u> _	_day of NOVEMBER	, 20_10		
•		•			
		for Florida Profit Corporat			-4
			nis document are true. Any false inform	nation constitu	nes
a third d	egree felony	as provided for in s.817.155,	r.s.		
Signatur	e of Chairma	an, Vice Chairman, Director, (Officer, or, if Directors or Officers have	e not been	
selected,	, an Incorpor	ator: ////////	ed		
Printed 1	Name: MICH	AEL D. LEADERTitle:	PRESIDENT/CEO	-	
Require	d Signature(s) on behalf of Other Busines	s Entity: Individual(s) signing affirm(s	s) that the fact:	S
stated in	this docume	ent are true. Any false informa	ition constitutes a third degree felony as	s provided for	: in
s.817.15	5, F.S. [See]	below for required signature(s).	.]		
	(17)		-		
Signature	e: Keck	WILLELDER TO LEADER		_	
Printed N	vante: MICHA	L D. LEADER	Title: MGR/MEMBER	_	
				_	
Signature	e:			_	
Printed N	Vame:		Title:		
				_	
Signature	e:			_	
Printed N	Name:		Title:	_	
				-	
Signature	e:			_	
Printed N	Name:		Title:	_	
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Printed N	Vame:		Title:	=	
Signature	e:	<u> </u>		-	
Printed N	Vame:		Title:	- A	
		<u>artnership or Limited Liabili</u>	ty Partnership:	高州 晋	WHILE I
Signature	e of one Gen	eral Partner.			F My 19 gare
	1	,		高生	- Massac
		<u>artnership or Limited Liabili</u>	ty Limited Partnership:	Gra erre	
Signatur	es of <u>ALL</u> G	eneral Partners.		TO THE	
					Carrie of
		<u>iability Company:</u>			
Signature	e of a Membe	er or Authorized Representative	÷. '. '	> 0 7	
All other					
Signature	e of an autho	rized person.			
Fees:					
	Certificate of	Conversion:	\$35.00		
F	ees for Flori	ida Articles of Incorporation:	\$70.00		
	Certified Cop	-	\$8.75 (Optional)		
	Certificate of		\$8.75 (Optional)		

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

ARTICLE I The name of the co	NAME rporation shall be: LEADEF	R & LEADER.	PA
	PRINCIPAL OFFICE		
	Principal street address	Mailing addr	ess, if different is:
633 SOU	TH ANDREWS AVENUE		
SUITE 201			
FORT LAL	DERDALE, FLORIDA 33301		
ADDICE D III	nimnoam		
ARTICLE III	hich the corporation is organized is:		
The purpose for wi	inch the corporation is organized is:		
Any and all	l lawful business purpose	with primary function to	serve as a law firm.
ARTICLE IV The number of shar	SHARES es of stock is: 100		
ADTICLE II		ACTOR C	
	INITIAL OFFICERS AND/OR DIRI		
Address:			
. Address:	833 S. ANDREWS AVENUE SUITE 201	Address: 633 S. ANDREWS	AVENUE
			ALE, FLORIDA 33301
	FORT LAUDERDALE, FLORIDA 33301	TONY ENOBLINO	LEC, 1 EO/IIOA 55551
Name and Tit	tle:	Name and Title:	
Address:		Address:	
)		
Name and Tit	ile:	Name and Title:	
Address:		Address:	4
•			<u> </u>
			I can
ADDIOLDIN			57 5 7
	REGISTERED AGENT	. 11 \ 64 \	To go to the contract of the c
	rida street address (P.O. Box NOT accep	iable) of the registered agent is:	
Name: Address:	MICHAEL D. LEADER, ESQ. 633 SOUTH ANDREWS AVENUE; SUITE 201		The 30 (T)
Address:		·	
	FORT LAUDERDALE, FLORIDA 33301		
ARTICLE VII	INCORPORATOR		##.
	ress of the Incorporator is:		# 6 S
Name:	MICHAEL D. LEADER, ESQ.		
Address:	633 S ANDREWS AVENUE; SUITE 201		
	FORT LAUDERDALE, FLORIDA 33301		
Having been name	d as registered agent to accept service of	process for the above stated corporate	ion at the place designated in
this certificate, I an	n familiar with and accept the appointmen	nt as registered agent and agree to act i	n this capacity
UU Λ			
MOURIN	110011	11-1 - 2010	
Remin	red Signature/Registered Agent	Date	-
)	and a section of the	Date	
I submit this docur	pent and affirm that the facts stated here	ein are true. I am aware that any fals	se information submitted in a
document to the De	partment of State constitutes a third degre	ee felony as provided for in s.817.155, .	F.S.
$(V \cdot n)$		· · ·	
MOLDOL	Vicell	11-1-2010	
Require	ed Signature/Incorpora/or	Date	-