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(Requestor's Name)				
, (Address)				
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(City	/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
Certified Copies	Certificates	s of Status		
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SECRETARY OF STATE
FALL AHASSEF FISHE

B. BOSTICK

JAN 2 5 2011

EXAMINER

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: IMPULSE JETS	;		
	Name of Resulting Florida Profit Co	rporation	
	nversion, Articles of Incorporation "Florida Profit Corporation" in ac	n, and fees are submitted to convert an ecordance with s. 607.1115, F.S.	
Please return all correspondence	ce concerning this matter to:		
DEWAYNE THAMES			
Contact	Person		
IMPULSES JETS			
Firm/Co	mpany		
3980 AIRPORT ROAD #5		~ i	
Addr	ess	ACC =	
BOCA RATON, FLORIDA	33431	JAN 2 AHAS	
City, State an	ıd Zip Code	85 <u>1</u>	
dewayne@impulsejets.co	om future annual report notification)	JAN 21 PH I2: 01 CRE IANY OF STATE AHASSEE, FLORID	
For further information concer	ning this matter, please call:	IDA	
DEWAYNE THAMES	at (561) 239	9-3100	
Name of Contact Person	Area Code and Days	time Telephone Number	
Enclosed is a check for the foll	owing amount:		
\$105.00 Filing Fees \$\square\$	5 Filing Fees	☑\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS:	MAILING.		
Registration Section	&		
Division of Corporations Clifton Building Division of Corporations P. O. Box 6327			
2661 Executive Center Circle		P. O. Box 6327 Tallahassee, FL 32314	
Tallahassee, FL 32301	i ananassee,	1 L 32314	

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.

Florida Statutes.
1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
IMPULSE JET LLC \\ L08000112556
Enter Name of Other Business Entity
2. The "Other Business Entity" is a IMPULSE JETS LLC (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 <u>FLORIDA</u> (Enter state, or if a non-U.S. entity, the name of the country)
10 -9 0 0 V
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:
NOT CHANGED
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
Enter Name of Florida Profit Corporation
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.

Page 1 of 2

· Signed this	Anuary ,20_11.			
Required Signature for Florida P Individual signing affirms that the fa a third degree felony as provided for	facts stated in this document are true. Any false info	ormation (consti	itutes
Signature of Chairman, Vice Chairn selected, an Incorporator: Selected Name: Dewayor Ti-la	man, Director, Officer, or, if Directors or Officers h	nave not b	een	
stated in this document are true. An s.817.155, F.S. [See below for required]	-	y as provi		
Signature: Dewry Dan	h_			
Printed Name: DEWAYNE THAMES	Title: PRESEDENT			
Printed Name:	Title:	<u> </u>		
Printed Name:	Title:			
Signature:	Title:			
Printed Name:	Title:			
Signature:		Z _S	_	
Printed Name:	Title:			
Signatura			11 JAN 2	1
Printed Name:	Title:		2	Electronica Transcomita
			-0	
If Florida General Partnership or I	Limited Liability Partnership:	JF STATE FLORID,	PM 12: 01	
Signature of one General Partner.			0	
If Florida Limited Partnership or I Signatures of <u>ALL</u> General Partners.	Limited Liability Limited Partnership:	DA		•
If Florida Limited Liability Compa Signature of a Member or Authorized				
All others: Signature of an authorized person.				
Fees:				
Certificate of Conversion:	\$35.00			
Fees for Florida Articles of	-			
Certified Copy:	\$8.75 (Optional)			
Certificate of Status:	\$8.75 (Optional)			

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

The name of the co	rporation shall be: IMPULS	E JETS INC	
	PRINCIPAL OFFICE Principal street address		ldress, if different is:
1525 NW	/ 56TH STREET	3980 AIRPORT ROAD	
FORT LAU	DERDALE, FLORIDA 33309	BOCA RATON, FLORID	A, 33431
ARTICLE III	PURPOSE		
	hich the corporation is organized is:		
Λ NIV	AND ALL L	۸ ۱۸/EIII DI	ICINIECO
AINI	AND ALL L	AVVEUL D	JOINESS
	SHARES		
The number of shar	10		
ARTICLE V	INITIAL OFFICERS AND/OR DIRE		
	tle: Dewayne Thames President		
Address:	3980 AIRPORT ROAD #5	Address:	· · · · · · · · · · · · · · · · · · ·
	BOCA RATON, FLORIDA 33431		
Name and Ti	tje; KATHERN THAMES VICE PRESIDENT	Name and Title:	
Address:	292 KICKAPOO	Address:	
riddress.	LIVINGITION TEXAS 77351		As _
Name and Ti	41	No	AR S T
Name and 11 Address:	tle:		SE N
Address:		Address:	CJ J P "
			7 1
	REGISTERED AGENT		D 12: 01 STATE LORID
Name:	rida street address (P.O. Box NOT accep	table) of the registered agent is:	
	DEWAYNE THAMES 3980 AIRPAY RD #3) A
Address:	BOLA RATON EL 33	43)	- 1 T
ADTICLE ITT	•		
	INCORPORATOR Iress of the Incorporator is:		
Name:	DEWAYNE THAMES		
Address:	3980 AIRPORT ROAD #5		
	BOCA RATON, FLORIDA 33431		
	ed as registered agent to accept service of		
this certificate, I an	n familiar with and accept the appointmer	nt as registered agent and agree to a	ect in this capacity
D.	αI	m . 1 1 a /n	
Lewin	ired Signature/Registered Agent	01/19/2010	
Requi	ired Signature/Registered Agent	Date	
	ment and affirm that the facts stated her		
document to the De	epartment of State constitutes a third degr	ee felony as provided for in s.817.15	55, F.S.
2)	OI.	. 1 1	
Dewin	- Cham	01/19/2010	
Requir	ed Signature/Incorporator	Date	