

#P/1000029921

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300196692223

03/11/11--01023--008 **122.50

FILED
11 MAR 25 AM 9:00
CLERK OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
MAR 28 2011



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 15, 2011

SAMUEL STEVENS & ASSOCIATES, LLC
WILLIAM HESLIN
2313 HIGHWAY 87
NAVARRE, FL 32566

SUBJECT: SAMUEL STEVENS & ASSOCIATES, LLC
Ref. Number: L09000012483

We have received your document for SAMUEL STEVENS & ASSOCIATES, LLC and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

ARTICLE VII of the articles of incorporation must list the INCORPORATOR and the incorporator must sign at the bottom of the page.

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Incorporation, if any.

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) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 211A00006300

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Samuel Stevens & Associates, 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:

William Heslin
Contact Person

Samuel Stevens & Associates, Inc.
Firm/Company

2313 Highway 87
Address

NAVARO, FL 32566
City, State and Zip Code

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

For further information concerning this matter, please call:

William Heslin at (850) 217-1853
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

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

FILED
11 MAR 25 AM 9:00
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:

Samuel Stevens & Associates, LLC

#209000012483

Enter Name of Other Business Entity

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

on February 6, 2009
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**:

Samuel Stevens & Associates, Inc.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: _____ *in H*
(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 this 8 day of March, 20 11.

Required Signature for Florida Profit Corporation:

Individual signing affirms 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.

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: _____

Printed Name: Steven Dougherty Title: PRESIDENT

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: _____
Printed Name: Samuel A. Dougherty Title: Vice President

Signature: _____
Printed Name: William F Heslin Jr Title: Secretary

Signature: _____
Printed Name: Steven C Dougherty Title: President

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: Samuel Stevens + Associates, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

2313 Highway 87
NAVARRE, FL 32566

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real Estate / Residential Construction For Profit

ARTICLE IV SHARES

The number of shares of stock is: 1,000,000 - \$1 PAR SHARE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Steven Dougherty, PRES Name and Title:

Address: 6242 E. BAY BLVD Address:
GULF BREEZE, FL 32563

Name and Title: Samuel A. Dougherty, VP Name and Title:

Address: 5857 Timberline Dr Address:
MILTON, FL 32570

Name and Title: William Heslin, JR CEO Name and Title:

Address: 7049 LAGO MIRADA DRIVE Address:
NAVARRE, FL 32566

ARTICLE VI REGISTERED AGENT

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

Name: Steve C. Dougherty

Address: 6242 E. Bay Blvd
Gulf Breeze, FL 32566

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: William Heslin JR

Address: 7049 LAGO MIRADA DR
NAVARRE, FL 32566

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

Required Signature/Registered Agent

Date

3-7-2011

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

Date

3-22-2011

FILED
11 MAR 25 AM 9:00
STATE OF FLORIDA
TALLAHASSEE