# P11000046674

(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:

Office Use Only

B. KOHR

MAY 17 2011

**EXAMINER** 



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11 MAY 17 PM 3: 35

SECRETARY OF STATE DIVISION OF CORPORATIONS

**CAPITAL CONNECTION, INC.**417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

ELAKS AUTO, INC.	
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by: SETH 5/17/11 1	1:00 UCC 1 or 3 File
	ime UCC 11 Search
	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

## **COVER LETTER**

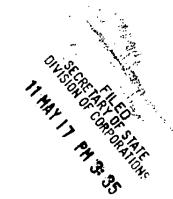
convert an F.S.

Division of Corpora			•
SUBJECT: ELKS AUTO	, INC.		
	Name of Res	sulting Florida Profit Co	rporation
The enclosed Certificate of "Other Business Entity" int			
Please return all correspond	dence concerning	this matter to:	
JAMES WEISS			
Con	tact Person		
Firm	ı/Company		
PO BOX 427			
	Address		
FLAGLER BEACH, FL	32136		
	te and Zip Code		
WEISSJW@YAHOO.C	COM For future annual rep	port notification)	
For further information cor	ncerning this matte	er, please call:	
JAMES WEISS	•	at ( 904 ) 47	7-2435
Name of Contact Per	rson	Area Code and Day	time Telephone Number
Enclosed is a check for the	following amoun	t:	
_	Certificate of	■\$113.75 Filing Fees and Certified Copy	☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS:			ADDRESS:
Registration Section		Registration	Section Corporations
Division of Corporations Clifton Building		P. O. Box 6	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 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.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of

Conversion is.
ELKS AUTO, LLC
Enter Name of Other Business Entity  2. The "Other Business Entity" is a LIMITED HABILITY COMPANY
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 01/09/1995 .
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 <u>attached Articles of Incorporation:</u>
ELKS AUTO, 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.)
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 16TH	_day of MAY	, 20_11	
Individ	lual signing af	for Florida Profit Corporation firms that the facts stated in this as provided for in \$12,135, F	s document are true. Any false informa	ation constitutes
Signatu selecte Printed	ire of Chairma d, an Incorpor l Name: JAME	an, Vice Chairman University O ator:  S WEISS  Title:	fficer, or, if Directors or Officers have	not been
stated i	n this docume 55, F.S (See )		Entity: Individual(s) signing affirm(s) on constitutes a third degree felony as	
Signatu Printed	re: Name: JAMES	WEISS LAND	Title: MGR	
Signatu Printed	nre: Name:		_ Title:	
Signatu Printed	ire: Name:		_ Title:	
Signatu Printed	ıre: Name:		Title:	
Signatu Printed	ire: Name:		Title:	
Signatu Printed	re: Name:		Title:	
Signatu	ire of one Gen			
		artnership or Limited Liability eneral Partners.	<u> Limited Partnership:</u>	
		iability Company: er or Authorized Representative.		
All oth Signatu	ers: are of an author	rized person.		
Fees:	Certificate of Fees for Flori Certified Cop Certificate of	ida Articles of Incorporation: by:	\$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)

11.1101W17 1	PRINCIPAL OFFICE	Mailing address, if different is:  PO BOX 427  FLACI FR BFACH FL 32138
1465 LAME	Principal <u>street</u> address BERT AVE	PO BOX 427
	ACH, FL 32136	FLAGLER BEACH, FL 32136
RTICLE III P	URPOSE ch the corporation is organized is:	
ANY AND ALL LA	WFUL BUSINESS ACTIVITIES FOR	R CORPORATIONS INCORPORATED UNDER CHAPTER 607
RTICLE IV Some number of shares		
	NITIAL OFFICERS AND/OR DIR	
Name and Title Address:	JAMES W. WEISS-PRESIDENT PO BOX 427	Name and Title: Address:
Addiess.	FLAGLER BEACH, FL 32136	Audiess.
		Name and Title:
Address:		Address:
Name and Title Address:		Name and Title: Address:
	EGISTERED AGENT da street address (P.O. Box NOT accep Deborah W. Táylor 3991 ST JOHNS AVE JACKSONVILLE, FL 32205	
	100 B B D D A 600 B	<del></del>
	NCORPORATOR  ess of the Incorporator is:	
Name:	JAMES W. WEISS-PRESIDENT	
Address:	PO BOX 427	
	FLAGLER BEACH, FL 32136	
aving been named is certificated I am	as registered agent to accept service of familiar with and accept the appointme	f process for the above stated corporation at the place designated on the state of
	d Signature/Registered Agent	
Sur Reguire	a Signature/Registered Agent	
submit this <b>L</b> ocum	ent and affirm that the facts stated he	rein are true. I am aware that any false information submitted in
submit this <b>L</b> ocum	ent and affirm that the facts stated he	ree felony as provided for in s.817.155, F.S.
submit this <b>L</b> ocum	ent and affirm that the facts stated he	