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

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B. BOSTICK
JUN 1 3 2011

EXAMINER

COVER LETTER

Division of 0	Corporations					
SUBJECT: King C	Concepts, Inc.					
		Resulting Florida Profit Corp	poration			
		rticles of Incorporation, ofit Corporation" in acc				an
Please return all cor	respondence concernin	g this matter to:				
William Smoak						
	Contact Person					
McClain, Smoa	k					
	Firm/Company			⊼ _{cs}		
320 W. Kennedy B	lvd. Suite 600			#11] #03		
ozo vv. rvomiody z	Address			SS	445-1 	#45 #45
T FI 22222				Si-	JUN 10 PH 3:27	10 M
Tampa, FL 33606	City, State and Zip Code			프	===	~,
	ony, onate and 21p 0000			LORID	Ω:	
billsmoak@gmai	l.com			DA A	1	
	be used for future annual r	•				
For further informat	ion concerning this ma	tter, please call:				
William Smoak		_at (_813) 221-	-1331			
Name of Co	ntact Person	Area Code and Dayti	me Telephone Number			
Enclosed is a check	for the following amou	ınt:				
□ \$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 ADDRES		MAILING A				
Registration Section Division of Corpora		Registration S				
Clifton Building	HOHS	Division of C P. O. Box 632				
2661 Executive Cen Tallahassee, FL 323		Tallahassee, I				

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.

riorida statutes.
1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
King Concepts, LLC L0900026840
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_3/18/2009 : CC
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 <u>attached Articles of Incorporation:</u>
King Concepts, 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	l this 9th	day of June	, 20_11			
Individ	dual signing a	re for Florida Profit Corpora affirms that the facts stated in t y as provided for in s.817.155,	his document are true. Any false inform	nation (constit	tutes
Signati selecte Printec	ure of Chairn d, an Incorpo l Name: Jeff	nan, Vice Chairman, Director, orator:	Officer, or, if Directors or Officers hav (2) : Vice President	e not b	een	
Requir stated i	red Signature in this docun	e(s) on behalf of Other Busine	ss Entity: Individual(s) signing affirm(s ation constitutes a third degree felony a			
Signatu	ıre:	Jeff Dignete	Title: MGRM	_		
Printed	Name: Jeff G	igante (00 V	Title: MGRM	_		
Signatu	ıre:					
Printed	Name:		Title:	_		
Signatı	ıre'					
Printed	Name:		Title:	<u>-</u>		
Signau Printed	ire: Name:		Title:	- <u>P</u>		
				-25	<u></u>	westeri
Signatu	ıre:					CHARLES
Printed	Name:		Title:		$\overline{\circ}$	L name
Signatu	ıre:			<u> </u>	P	, 3 (
Printed	Name:		Title:	<u>-7.0</u>	င့်	
<u>If Flor</u> Signatu	ida General ire of one Ge	Partnership or Limited Liabil neral Partner.	ity Partnership:	- STATE FLORIDA	: 27	
		Partnership or Limited Liabil General Partners.	ity Limited Partnership:			
		Liability Company: per or Authorized Representativ	e.			
All oth Signatu	ers: ure of an auth	orized person.				
Fees:			\$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 KING CONCEPTS, I	INC.	
i ne name of the	corporation shall be:		
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing ac	ldress, if different is:
	1015 S. HÖWARD AVE		·
	TAMPA, FL 33606	-	
		-	
ARTICLE III			
	which the corporation is organized is:		
ANY LAWF	UL BUSINESS PURPOSE		
ARTICLE IV	SHARES		
	nares of stock is:10,000		
ADMICE D	THEFTAL OFFICERS AND OF PERSON	mana	
Name and	INITIAL OFFICERS AND/OR DIRECT Title: JAMES LANZA, PRESIDENT	Nome and Titles	
Address:	1015 S. HOWARD AVE	Address:	
Addiess.	TAMPA, FL 33606		
N	TH. 1555 OLOMBITE 1405 DD5010		
Name and Address:	Title: JEFF GIGANTE, VICE PRESID		 _
Address:	1015 S. HOWARD AVE TAMPA, FL 33606		
	TAMEA, 1 L 33000		
			277 ETTE
	Title:		(/) - (-) (-) (-) (-) (-) (-) (-) (-) (-)
Address:		Address:	-
	· · · · · · · · · · · · · · · · · · ·		
ARTICLE VI	REGISTERED AGENT		G: 27
The name and F	lorida street address (P.O. Box NOT acceptable	le) of the registered agent is:	7 DA
Name:	WILLIAM SMOAK		
Address:	320 W. KENNEDY BLVD, SUIT		
	TAMPA, FL 33606		
ARTICLE VII	INCORPORATOR		
	ddress of the Incorporator is:		
Name:	JEFF GIGANTE		
Address:	1015 S. HOWARD AVE		
	TAMPA, FL 33606		
(,, <u>,</u> , ,)			
Having ocen nai	med as registered agent to accept service of pr am familiar with and accept the appointment a	ocess for the above stated corpo s registered agent and agree to a	ration at the place designated in
		s regisiereu ugeni unu ugree ni ut	- · ·
\			6(9/11
	Required Signature/Registered Agent		Date
Zandanie de L	1)		
i Submit this doc document to the	cument and affirm that the facts stated herein Department of State constitutes a third degree f	t are true. I am aware that the j	raise information submitted in a
посинен 10 МС.		стону из реочиси јог не 5.017.15.	, 1
1	all Min I		6/9/11
	V (V) Paul A Signature / Ingarage	·····	V / //