# 08911000119

(Requestor's Name)		
(Address)		
(Address)		
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
·		

Office Use Only

G. MCLEOD

AUG 11 2011

**EXAMINER** 



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TH AUG-9 PM 1:05

## **COVER LETTER**

TO: Registration Division of C			
SUBJECT: MINT	HOMES, INC.		
	Name of R	Resulting Florida Profit Cor	poration
			, and fees are submitted to convert an cordance with s. 607.1115, F.S.
Please return all corn	respondence concernin	g this matter to:	
JOHN SMOAK	· ·		
	Contact Person		
	Firm/Company	<del> </del>	
2715 E OAKLAND			
	Address		
FT LAUDERDALE	E, FL 33306		
(	City, State and Zip Code		
JOHN@RIVERV E-mail address: (to	IEWSELLS.COM be used for future annual r	report notification)	
For further informati	on concerning this ma	tter, please call:	
JOHN SMOAK		— *** \	-5166
Name of Cor		•	ime Telephone Number
Enclosed is a check	for the following amou	ant:	
<b>I</b> \$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
CTDEET ADDDEC	c.	MAILING	ADDDECC.

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

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:

MINT HOMES 110

conversion.

currently organized, formed or incorporated.

WHAT FIGHES, EEO.	
Enter Name of Other Business Entity	
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY	<b>☆</b> ≥
(Enter entity type. Example: limited liability company, limited partnership	ਤੋਂ <sup>'</sup>
general partnership, common law or business trust, etc.)	6-3III
first organized, formed or incorporated under the laws of FLORIDA	2
(Enter state, or if a non-U.S. entity, the name of the country)	
on OCTOBER 4 2010	ภ์
Enter date "Other Business Entity" was first organized, formed or incorporated	
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation	on:
MINT HOMES, 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 filed by the Florida Department of State; <u>AND 2</u> ) must be the same as the effective date listed 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	

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

Signed this	s 8day of AUGUST	, 20_11	
Required	Signature for Florida Profit Corpor	ation:	
Individual		this document are true. Any false inform	ation constitutes
selected a	n Incorporator: John Land	Officer, or, if Directors or Officers have	
Printed Na	me: JOHN SMOAK / Title	e: PRESIDENT	-
stated in th	is document are true. Any false inform F.S. [See below for required signature(s	ess Entity: Individual(s) signing affirm(s nation constitutes a third degree felony as [5].]  Title: MGRM	s provided for in
Signature:	OHN SMOAK	Tido, MCDM	-
Frinted Nat	He: yor IN SIMOAIC	I IIIe: MGKM	-
Signature:		Title:	_
Printed Nai	me:	Title:	-
Signature:			_
Printed Nai	ne:	Title:	- -
Signature:			
Printed Na	ne:	Title:	-
Signature: Printed Nai	me:	Title:	-
Signature:	no.	Title:	-
riiileu ivai	ne.	ritie:	•
<u>If Florida (</u> Signature o	General Partnership or Limited Liabi f one General Partner.	lity Partnership:	
<b>If Florida</b> Signatures	Limited Partnership or Limited Liabi of <u>ALL</u> General Partners.	lity Limited Partnership:	
<u>If Florida l</u> Signature o	Limited Liability Company: f a Member or Authorized Representativ	ve.	
	f an authorized person.		
Fee Cer	tificate of Conversion: s for Florida Articles of Incorporation tified Copy: tificate of Status:	\$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	
The name of the co	prporation shall be: MINT H	OMES INC
	PRINCIPAL OFFICE	o
	Principal street address	Mailing address, if different is:
2715 E C	DAKLAND PARK BLVD #101	<b>g</b>
FORT LAU	JDERDALE, FL 33306	
ADDICE BY	DUBBOOR	
ARTICLE III	hich the corporation is organized is:	
The purpose for w	men the corporation is organized is.	
(	$N \vdash R \Delta I$	BUSINESS
		DOUINEOO
ARTICLE IV	SHARES	
The number of share		
The Harrison of Share	res of stock is: 10	
	INITIAL OFFICERS AND/OR DIR	
	tie: JOHN SMOAK PRESIDENT	Name and Title:
Address:	2715 E OAKLAND PARK BLVD #101	Address:
	FORT LAUDERDALE, FL 33306	
Name and Ti	tle:	Name and Title:
Address:		4 1 1
Nama and Ti	tla	Name and Titles
Address:	iic.	Name and Title:
riddiess.		
		JOHN SMOAK
	REGISTERED AGENT	4.11.5. Cd
Name:	rida street address (P.O. Box NOT acce	ptable) of the registered agent is:
Address:	JOHN SMOAK  2715 E OAKLAND PARK BLVD #101	<del></del>
Addiess.	FORT LAUDERDALE, FL 33306	
		<del></del>
	INCORPORATOR	
	Iress of the Incorporator is:	
	JOHN SMOAK	
Address:	2715 E OAKLAND PARK BLVD 101	
	FORT LAUDERDALE, FL 33306	<del></del>
Havina heen name	ul us registered agent to accept service of	f process for the above stated corporation at the place designated in
this certificate. I an	n familiar with and accept the appointme	nt as registered agent and agree to act in this capacity
^		in as registered agent and agree to act in this capacity
().	lan la and	8/8/11
Redui	red Signature/Registered Agent	8/8/// Pore
regui	rea orginame registered agent	Date
I submit this docu	ment and affirm that the facts stated he	rein are true. I am aware that any false information submitted in a
document to the Do	epartment of State constitutes a third degi	ree felony as provided for in s.817.155, F.S.
$\nu$	V V V.	5/6/11
<i>\</i>	Suburtah	
Requir	ed Signature/Incorporator	Date