

P11000090989

(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)

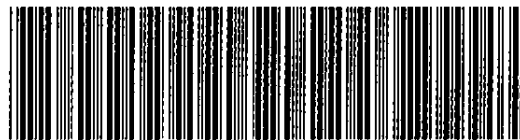
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W1100005114

Office Use Only

EFFECTIVE DATE: 12/01/11



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10/03/11--01034--007 **105.00

FILED
11 OCT 17 AM 04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

OCT 18 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 4, 2011

VANESSA ROMAN
PO BOX 422878
KISSIMMEE, FL 34745

SUBJECT: BRIDGE OF HOPE OF CENTRAL FLORIDA, CORP.
Ref. Number: W11000051114

We have received your document for BRIDGE OF HOPE OF CENTRAL FLORIDA, CORP. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 011A00022793

FILED
11 OCT 17 AM 10:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BRIDGE OF HOPE OF CENTRAL FLORIDA, CORP.

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:

Vanessa Roman

Contact Person

Bridge of Hope of Central Florida

Firm/Company

PO Box 452878

Address

Kissimmee, FL 34745

City, State and Zip Code

esteban@bohcf.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Esteban Melendez at (407) 575-4636

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|--|
| <input checked="" type="checkbox"/> \$105.00 Filing Fees | <input type="checkbox"/> \$113.75 Filing Fees
and Certificate of
Status | <input checked="" type="checkbox"/> \$113.75 Filing Fees
and Certified Copy | <input type="checkbox"/> \$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

FILED
11 OCT 17 AM 10:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation

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:

BRIDGE OF HOPE OF CENTRAL FLORIDA, LLC.

Enter Name of Other Business Entity

2. The "Other Business Entity" is a LLC

L08000040835

(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 04/28/2008

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:

N/A

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation**:

BRIDGE OF HOPE OF CENTRAL FLORIDA, CORP.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: 12/01/2011

(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.

EFFECTIVE DATE

12/01/11

FILED
11 OCT 17 AM 04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signed this 12 day of October, 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: [Signature]

Printed Name: Vanessa Roman Title: CEO

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: [Signature]
Printed Name: Vanessa Roman Title: CEO

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

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)

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11 OCT 17 AM 10:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: **BRIDGE OF HOPE OF CENTRAL FLORIDA, CORP.**

ARTICLE II PRINCIPAL OFFICE

Principal street address

1331 Kevstin Dr.

Kissimmee, FL 34744

Mailing address, if different is:

PO Box 452878

Kissimmee, FL 34745

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is: **1,000.00**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Vanessa Roman, CEO

Address:

1331 Kevstin Dr.

Kissimmee, FL 34744

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Vanessa Roman

ARTICLE VI REGISTERED AGENT

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

Name:

Vanessa Roman

Address:

2148 Continental St.

St. Cloud, FL 34769

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Vanessa Roman

Address:

1331 Kevstin Dr.

Kissimmee, FL 34744

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

10/12/2011

Date

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

10/12/2011

Date

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TALLAHASSEE, FLORIDA