P11000099422

(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:				
L. SELLERS				
NOV 1 8 2011				
EXAMINER				

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

то:	Registration S Division of C		•			
SUBJ	ECT: Xpres	sFX Inc.				
			esulting Florida P	rofit Cor	poration	
					, and fees are submitted to cordance with s. 607.1115,	
Please	return all corr	espondence concernin	g this matter to	:		
Micha	ael Thomas					
		Contact Person				
Xpre	ssFX Inc.					
		Firm/Company		_		
103	Commerce	Street Suite #100				
		Address				
Lake	Mary, FI 32	2746			,	
	C	ity, State and Zip Code		_		
mtho	mas@xpre	SSfx.com be used for future annual r	eport notification)	_		
For fu	rther informati	on concerning this ma	tter, please call	:		
Micha	ael Thomas	_	at (407	١ 409	-6776	
	Name of Con	tact Person	Area Code a		me Telephone Number	
Enclo	sed is a check f	for the following amou	int:			
2 \$10	5.00 Filing Fees	\$113.75 Filing Fees and Certificate of Status	■\$113.75 Filin and Certified Co		\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
Regist Divisi	ET ADDRES ration Section on of Corporat n Building	_	Regis Divisi	tration	Corporations	
	Executive Cent	er Circle			FL 32314	

Tallahassee, FL 32301

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:
XpressFX LLC
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 08/31/2006
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> :
XpressFX Inc
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: January 1, 2012 (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

Page 1 of 2

currently organized, formed or incorporated.

			-		
Signed	l this 11th	day of No	vember	, 20_11	
Individ	lual signing af	firms that the	Profit Corpora e facts stated in the for in s.817.155,	his document are true. Any false info	rmation constitutes
Signat selecte	ure of Chairma	ın, Vice Cha ator:	irman Director,	Officer, or, if Directors or Officers h	ave not been
Printed	l Name: Michae	el Thomas /	Title:	President/CEO	
stated s.817.1	in this docume 155, F.S. [See b	nt are true. A	Any false informa uired signature(s)		as provided for in
Signau Printed	Name: Michae	Thomas	m =	Title: President/CEO	
Signati Printed	ıre: Name:			Title:	
Signati	ire:			Title:	
rinted	i Name:			Title:	
Signatı Printed	ıre: Name:			Title:	
Signati Printed	ire: Name:			Title:	
Signati	ıre:				
Printed	Name:			Title:	
	ida General Pa are of one Gene		r Limited Liabili	ity Partnership:	
	ida Limited Pa arcs of <u>ALL</u> Go			ty Limited Partnership:	
If Flor Signati	ida Limited Li ure of a Membe	iability Com er or Authoriz	pany: zed Representative	e.	
All oth Signatu	ners: are of an author	rized person.			
Fees:	Certificate of Fees for Flori Certified Cop Certificate of	da Articles e y:	of Incorporation:	\$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	'V Inc	
i ne name of the co	orporation shall be: XpressF	X Inc.	
ARTICLE II	PRINCIPAL OFFICE		
100.0	Principal street address	Mailing address, if different	ent is:
	nmerce Street		
Suite #10		- Martin Committee Committ	
Lake Ma	ry, Fl 32746		
ARTICLE III	PURPOSE		
	which the corporation is organized is:		
F F			
The Corporation sh	nall engage in any activity or business permitte	d under the laws of the United States and of the State of f	Florida
ARTICLE IV	SHARES		
The number of sha	<u> </u>		
	res of stock is: 100		
ARTICLE V	INITIAL OFFICERS AND/OR DIF	ECTORS	
	it[e: Michael Thomas i President	Name and Title: Michael Thomas - Director	
Address:	103 Commerce Street	Address: 103 Commerce Street	
	Suite #100	Suite #100	
	Lake Mary, FI 32746	Lake Mary, FI 32746	· · · · · · · · · · · · · · · · · · ·
Name and T	itle: Michael Thomas - Secretary	Name and Title:	
Address:	103 Commerce Street	Address:	
Tradition.	Suite #100		
	Lake Mary, FI 32746		
Name and T	ITIC: Michael Thomas - Treasurer	Name and Title:	
Address:	103 Commerce Street	Address:	
	Suite #100		
	Lake Mary, Fl 32746	Michael Thomas	***
ARTICLE VI	REGISTERED AGENT		
	orida street address (P.O. Box NOT acco	ntable) of the registered agent is:	
Name:	Michael Thomas	public) of the registered agent is.	
Address:	103 Commerce Street Suite #100		
	Lake Mary, FI 32746		
ARTICLE VII	<u>INCORPORATOR</u>		
The <u>name and ado</u>	dress of the Incorporator is:		
Name:	Michael Thomas		
Address:	103 Commerce Street Suite #100		
	Lake Mary, Fl 32746		
this certificate, Yai	m familiar with and accept the appointm	of process for the above stated corporation at the pent as registered agent and agree to act in this capac	lace designated in city
Requ	ired Signature/Registered Agent	Date	
I submit this docu document to the D	ment and affirm that the facts stated his epartment of State constitutes a third deg -	rein are true. I am aware that any false informato ree felony as provided for in s.817.155, F.S.	ion submitted in a
		11/11/2011	
"	und flow	<u> </u>	
R ç∕ [uir	red Signature Incorporator	Date	