# P1200008200

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

EFFECTIVE DATE 01/25/12



600219089466

01/23/12--01055--004 \*\*122.50



D. BRUCE

JAN 25 2012

**EXAMINER** 

## **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: FINAL FRONTIER (Name of Resulting I	DITOGOR LIVING INC. Florida Profit Corporation	_		
The enclosed Certificate of Conversion, Articles of "Other Business Entity" into a "Florida Profit Corp	-			
Please return all correspondence concerning this m	atter to:			
CHESTER A ARCHER Contact Person				
FINAL FRONTIER OUTDOOR LIVING	<u>x6</u>			
3651 SW ROSSER BUD. Address			12	
PORT SAINT LUCIE, FL 34953 City, State and Zip Code		MIASSET	JAN 23	
E-mail address: (to be used for future annual report notion	ification)	EF FLORIB	AM 8: 2	
For further information concerning this matter, plea	ase call:	ezimi ≫	0	
ZARMINA ARCHER at ( 9  Name of Contact Person Are	54 ) 326-7057 ea Code and Daytime Telephone Number			
Enclosed is a check for the following amount:	-			
	3.75 Filing Fees rtified Copy 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			

#### **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.

Tionaa statutes.
1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
FINAL FRONTIER DESIGNER LANDSCAPING Enter Name of Other Business Entity L1100076553
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 Harch 1s- Zoll  Enter date "Other Business Entity" was first organized, formed or incorporated 25
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:
NCORPORATED DE ON
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
TIVAL TRONTIES OUTDOOR LIVING INC.  Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: FEBIZOPEU 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 currently organized, formed or incorporated.

Page 1 of 2

Signed this 20 day of JANUARY	, 20 12.	
Required Signature for Florida Profit Corporational Individual signing affirms that the facts stated in this a third degree felony as provided for in s.817.155, F	s document are true. Any false inform	nation constitutes
Signature of Chairman, Vice Chairman, Director, O selected, an Incorporator:  Printed Name: CHESCE ARCHER  Title:	fficer, or if Directors or Officers hav	re not been
Required Signature(s) on behalf of Other Business stated in this document are true. Any false informat s.817.155, F.S. [See below for required signature(s).]	ion constitutes a third degree felony a	s) that the facts as provided for in
Signature:  Printed Name: ZARMUA ARCHER	Title: VICE - POSIDENT	_ _
Signature:Printed Name:	_ Title:	_ <del>_</del>
Signature:Printed Name:	_Title:	_ _
Signature:Printed Name:	Title:	- - <u>-</u>
Signature:Printed Name:	_ Title:	Z JAN 2
Signature:Printed Name:	_ Title:	SE CONTRACTOR OF THE PROPERTY
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:	8: 26 ORIDA
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		
All others: Signature of an authorized person.		
Fees:  Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate 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 No.	AME  oration shall be: FINAL TROUTIER	OUTDOOR LIVIN	is luc.
3651	RINCIPAL OFFICE  Principal street address  SW ROSSER BLVD.  AINT LUCIE, FL 34953	Mailing ad	Idress, if different is:
· · · · · —	IRPOSE  h the corporation is organized is:  MATELY OWNED - FOR PRO	PIT	
ARTICLE IV S. The number of shares			
Name and Title Address:	TITIAL OFFICERS AND/OR DIRECTOR CHESTER ANTHONY ARCHE 3651 SW ROSSER BLVD PORT SAINT LIKIE, FL 3495 PRESIDENT	Name and Title: Address:	
Name and Title Address:	ZARMINA KHAUD ARCHER 3651 SW ROSERR BLUD PORT SAINT LUCK FL 3495; VICE-PRESIDENT-	Address:	
Name and Title Address:			
ARTICLE VI RI	EGISTERED AGENT		
The name and Florid	a street address (P.O. Box NOT acceptable) of	f the registered agent is:	
Name: Address:	ZARMINA ARCHER 3651 SW ROSSER BUID PORT SAINT LICIE, FL 34		
ARTICLE VII IN	ICORPORATOR		
The name and address	ss of the Incorporator is:		
Name: Address:	ZARMINA ARCHER 3651 SW POSEER BLY PORT SAINT LUCIE, FL S	₹4223 (D	
Having been named of this certificate, I am fo	as registered agent to accept service of process amiliar with and accept the appointment as reg	s for the above stated corpor istered agent and agree to ac	ration at the place designated in It in this capacity
	2	1/20/2013	2
Required	Signature/Registered Agent	1/20/2013 Date	<u> </u>
I submit this docume	nt and affirm that the facts stated herein are rtment of State constitutes a third degree felon	true. I am aware that any f y as provided for in s.817.15:	alse information submitted in a 5, F.S.

Required Signature/Incorporator