# P1200039444

(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

APR 27 2012

**EXAMINER** 



800230984138

04/25/12--01024--006 \*\*105.00

SECRETARY OF STANKING

## **COVER LETTER**

TO:	Registration	Section	,			_
	Division of C	Corporations				
SUBJ	ECT: FISH S	SKINZ INC				
	<del>.</del>	Name of R	esulting Florida Pr	ofit Corp	poration	
					and fees are submitted to ordance with s. 607.1115,	
Please	return all corr	espondence concernin	g this matter to:			
ANTH	IONY BROA	D				
		Contact Person		_		
FISH	SKINZ INC	0			•	
		Firm/Company		_		
<u>4527</u>	S. HOPKINS			_		
		Address				
TITU	SVILLE, FL 3	32780				
	C	City, State and Zip Code		_		
brance E	diannbroad@ -mail address: (to	Dyahoo.com be used for future annual r	eport notification)	Name of the State		
For fu	rther informati	on concerning this ma	tter, please call:			
ANTH	IONY BROAD		at (_32i	) 289-	-1410	
	Name of Cor	ntact Person	Area Code a	nd Daytii	me Telephone Number	
Enclos	sed is a check t	for the following amou	int:			
<b>☑</b> \$10:	5.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	■\$113.75 Filing and Certified Co		☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
STRE	ET ADDRES	S.	MAII	INC A	DDRFSS.	

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 Conversion is:	of	
FISHSKINZ 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 01/06/2010  Enter date "Other Business Entity" was sharped, the state or country under		TI-
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under which it is now organized, formed or incorporated:	ine iav	vs 01
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> FISH SKINZ INC	<u>oorati</u>	on:
Enter Name of Florida Profit Corporation		
5. If not effective on the date of filing, enter the effective date: 04/04/2012 (The effective date: 1) cannot be prior to nor more than 90 days after the date this doc filed by the Florida Department of State; AND 2) must be the same as the effective date 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 a conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting		!

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

conversion.

currently organized, formed or incorporated.

Signed this 6T	H day of MARCH	, 20_12	,
Required Sig	nature for Florida Profit Corporat	ion:	
Individual sig	ning affirms that the facts stated in the	is document are true. Any false information	ation constitutes
	felony as provided for in s.817.155,		
Signature of C	Chairman, Vice Chairman, Director, (	Officer, or, if Directors or Officers have	not been
selected, an Ir	ncorporator:		
Printed Name	: ANTHONY BROAD Title:	PRESIDENT	
Required Sign	nature(s) on behalf of Other Busines	s Entity: Individual(s) signing affirm(s)	that the facts
stated in this	document are true. Any false informa	tion constitutes a third degree felony as	provided for in
0 217 155 E S	S (See hald w for required cignature(c)		-
s: 1 A	ANTHONY BROAD		
Signature:	ANTHONY BROAD	Title: PRESIDENT	
rimed Name.	ARTHORY BROKE	Title, (KESIDEN)	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:			
Signature			
Printed Name:	·	Title:	
Signature:		Tid	
Printed Name:	·	Title:	
Signature:		·	
Printed Name:	:	Title:	
If Florida Ge	neral Partnership or Limited Liabili	ty Partnershin:	
	ne General Partner.	<u> </u>	
If Florida Lir	mited Partnership or Limited Liabili	ty I imited Partnership	
	ALL General Partners.	ty Difficed Lait theraing.	
	mited Liability Company:  Member or Authorized Representative	· ·	
All others: Signature of a	n authorized person.		
Fees:			
	icate of Conversion:	\$35.00	
Fees f	for Florida Articles of Incorporation:	\$70.00	
	ied Copy:	\$8.75 (Optional)	
Certif	icate of Status:	\$8.75 (Optional)	

**ARTICLES OF INCORPORATION**In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I	NAME	ZINIZ INIC
The name of the cor	poration shall be: FISH Sk	NINZ ING
ARTICLE II	PRINCIPAL OFFICE	
4507.0	Principal street address	Mailing address, if different is:
	IOPKINS AVE	
TITUSVILLI	E, FL 32780	
	<del></del>	
ARTICLE III 1	PURPOSE	
	nich the corporation is organized is:	
ANY	AND ALL I	AWFUL BUSINESS
		A TOTAL DOGINALOG
	<u>SHARES</u>	
The number of share	es of stock is: 5000	
ARTICLE V	INITIAL OFFICERS AND/OR DI	PECTARS
	e: ANTHONY BROAD, PRESIDENT	Name and Title; Brandi Broad, vice president
Address:	822 MARIAN COURT	Address: 822 MARIAN COURT
Addiess.	TITUSVILLE, FL 32780	TITUSVILLE, FL 32780
	le:	Name and Title:
Address:		Address:
Name and Tit	:le:	Name and Title:
Address:		Address:
		ANTHONY BROAD
	REGISTERED AGENT	And the College of the second
	ida street address (P.O. Box NOT acco	eptable) of the registered agent is:
Name:	ANTHONY BROAD	_ <del></del>
Address:	4527 HOPKINS AVE	_ <del></del>
	TITUSVILLE, FL 32780	<del></del>
ARTICLE VII	INCORPORATOR	
	ress of the Incorporator is:	
Name:	ANTHONY BROAD	•
Address:	4527 HOPKINS AVE	
,	TITUSVILLE, FL 32780	
		of process for the above stated corporation at the place designated in nent as registered agent and agree to act in this capacity
		3/8/12
	() () () () () () () () () () () () () (	
V   Requi	red Signature/Registered Agent	'Date '
\ I submit this docus	ment and affirm that the facts stated b	erein are true. I am aware that any false information submitted in a
document to the De	partment of State constitutes a third de	gree felony as provided for in s.817.155, F.S.
// 20		_ / /
1		7/4/12
Panis	A Cloneture/Incorporation	
( Kequire	ed Signature/Incorporator	Date