12000046153

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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FILED
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SECRETARY P. FLORIDI

J. BRYAN
MAY 1 7 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: CONFIDENT SELF IMAGE, IN	
Name of Resul	lting Florida Profit Corporation
	es of Incorporation, and fees are submitted to convert an Corporation" in accordance with s. 607.1115, F.S.
Please return all correspondence concerning th	uis matter to:
CRISTEL HARDEN	
Contact Person	
CONFIDENT SELF IMAGE, INC.	
Firm/Company	SE SE T
112 ANNWOOD ROAD	
Address	SSEE.F.
PALM HARBOR, FL 34685 City, State and Zip Code	TILED SECRETARY OF STATE TALLALIASSEE, FLORIB
City, State and 21p code	
INFO@CONFIDENTSELFIMAGE.CONFIDEN	VI rt notification)
For further information concerning this matter	, please call:
CRISTEL HARDEN 91	t (727) 430-3581
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:	
	□\$113.75 Filing Fees and Certified Copy Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, 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:
CONFIDENT SELF IMAGE, LLC #LICCOO119278
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)
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.)
The state of the s
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 NOVEMBER 16, 2010
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
<u> </u>
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
CRISTEL ENTERPRISES, CO.
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 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 this 14TH day of MAY	, 20_12
Required Signature for Florida Profit Corporati	on: s document are true. Any false information constitutes
Signature of Chairman, Vice Chairman, Director, O selected, an Incorporator:	<u>~</u>
s.817.155, F.S. [See below for required signature(s).]	ion constitutes a third degree felony as provided for in
Signature: Custo Harden Printed Name: CRISTEL HARDEN	Title: MEMBER
Signature:Printed Name:	Title
Signature:Printed Name:	Title: Title: Title: Title:
Signature: Printed Name:	Title:
	TO B
Signature:Printed Name:	Tive :
Printed Name:	_ Title: 5
Signature:	
Printed Name:	_ Title:
If Florida General Partnership or Limited Liability Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	V 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)

	NAME (poration shall be: CRISTEL EN	NTERPRISES, CO.	
		,	
ARTICLE II	PRINCIPAL OFFICE	No. 21' 1.1 10. 1100; 1.	
440 441411	Principal street address	Mailing address, if different is:	
	WOOD ROAD	SAME	
PALM HAR	BOR, FLORIDA 34685		
		-	
ARTICLE III			
The purpose for wh	nich the corporation is organized is:		1
ANY AN	ND ALL LAWFUL BU	JSINESS E	てして !!!
ARTICLE IV	<u>SHARES</u>		足(
The number of share	es of stock is: 100	in the second of	
	• •		سر ا
	INITIAL OFFICERS AND/OR DIR		5 T
	e: CRISTEL HARDEN, PRESIDENT		<u></u>
Address:	112 ANNWOOD ROAD	Address:	<u>-</u>
	PALM HARBOR, FL 34685		
Name and Tit		Name and Title:	
Address:			
2 tuul 033.		Address:	
4 691			
	le:	Name and Title:	
Address:		Address:	
ARTICLE VI	REGISTERED AGENT		
	ida street address (P.O. Box NOT accept	otable) of the registered agent is:	
Name:	CRISTEL HARDEN	Principle of the Angles of the	
Address:	112 ANNWOOD ROAD		
radicss.	PALM HARBOR, FL 34685		
	-		
	<u>INCORPORATOR</u>	•	
The name and addi	ress of the Incorporator is:		
Name:	PETRA A. TRINIDAD		
Address:	102 PIERCE CHRISTIE DR., STE. A		
	VALRICO, FL 33594		
77			
		f process for the above stated corporation at the place design ent as registered agent and agree to act in this capacity	ated in
	0 1	g g	
() n. GT	1) Harolona	05/14/2012	
	J riview		
Kequir	red Signature/Registered Agent	Date	
I submit this docum	nent and affirm that the facts stated he	rein are true. I am aware that any false information submitt	ted in a
		ree felony as provided for in s.817.155, F.S.	
) &	- and areas to the second of t	
K-+- ()	1 Time Vail	05/14/2012	
June	Symbolic		
Require	ed Signature/Incorporator	Date	