## P120000 48721

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



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05/24/12--01010--022 \*\*105.00



J. BRYAN

MAY 25 2012

**EXAMINER** 

## **COVER LETTER**

TO:	Registration Section	
	Division of Corporations	

Tallahassee, FL 32301

SUBJECT: JD FEEGER ENTERPRISES, INC.

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:

<b>DEBORAH FEEG</b>	ER		
	Contact Person		TALLAHAYOUR
	Firm/Company		To the state of th
1287 N RIO VISTA	BLVD		<u> </u>
	Address		
FORT LAUDERD	ALE, FL 33316 City, State and Zip Code		
joelsoutboard@n E-mail address: (to	nindspring.com be used for future annual r	eport notification)	
For further informati	on concerning this ma	tter, please call:	
DEBORAH FEEGE	R	at (_954 )_763	3-7729
Name of Cor	ntact Person		time Telephone Number
Enclosed is a check to	for the following amou	ınt:	
☑ \$105.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	■\$113.75 Filing Fees and Certified Copy	□\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES	<u>S:</u>	MAILING	ADDRESS:
Registration Section		Registration	
Division of Corporat	ions		Corporations
Clifton Building		P. O. Box 63	
2661 Executive Cent	er Circle	Tallahassee,	FL 32314

## **Certificate of Conversion** For "Other Business Entity" Into

Florida Statutes.

PARTIE BEREST 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,

1. The name of the "Other Business Entity" imme Conversion is:	ediately prior to the filing of this Certificate of
	#1 = 1 0000 27.000
JD FEEGER ENTERPRISES, LLC	#LD6 0000 33 869
Enter Name of	Other Business Entity
2. The "Other Business Entity" is a LIMITED LIA	ABILITY COMPANY
(Enter entity type. Example: limit	red liability company, limited partnership, amon law or business trust, etc.)
first organized, formed or incorporated under the	laws of FLORIDA
•	S. entity, the name of the country)
on 3/29/2006	
	was first organized, formed or incorporated
3. If the jurisdiction of the "Other Business Entity which it is now organized, formed or incorporated	y" was changed, the state or country under the laws of l:
4. The name of the Florida Profit Corporation as	set forth in the attached Articles of Incorporation:
JD FEEGER ENTERPRISES, INC.	
Enter Name of FI	orida Profit Corporation
	nore than 90 days after the date this document is 2) must be the same as the effective date listed in the
6. The conversion is permitted by the applicable la conversion complies with such law(s) and the requestroncersion.	• • • • • • • • • • • • • • • • • • • •
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 21 day of	, 20 <u>/2</u>
Required Signature for Florida Profit Corporati Individual signing affirms that the facts stated in thi a third degree felony as provided for in s.817.155, F	s document are true. Any false information constitutes
Signature of Chairman, Vice Chairman, Director Oselected, an Incorporator:  Printed Name: DEBORAH FEEGER  Title:	officer, or, if Directors or Officers have not been PRESIDENT
stated in this document are true. Any false informat s.817.155, F.S. [See below for required signature(s).]	
Signature: Deborah Feeger Printed Name: DEBORAH FEEGER	TVI MENDED
Printed Name: DEBORAH FEEGER	_ little: MEMBER
Signature:Printed Name:	_Title:
Signature:Printed Name:	Title:
Signature: Printed Name:	Roll & O
	200
Signature:Printed Name:	_ Title:
Signature:	
Printed Name:	_Title:
If Florida General Partnership or Limited Liability Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability Signatures of ALL 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	NAME		
The name of the cor	poration shall be: JD FEE(	GER ENTERPRISES	S. INC.
ARTICLE II	PRINCIPAL OFFICE		J,
	Principal street address	Mailing address, if differe	ent is:
1287 N RI	O VISTA BLVD		
FORT LAUE	DERDALE, FL 33316		
ARTICLE III F	PURPOSE		
	ich the corporation is organized is:		
This corporation ma	ly transact any and all lawful business for wh	ich corporation may be incorporated under the Laws of	the State of Florida.
ARTICLE IV			
The number of share	es of stock is: 1,000 Shar	'PS	٠,
ADTICLE II	•	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	, 2 A
	INITIAL OFFICERS AND/OR DIR		8 3
Address:	1287 N RIO VISTA BLVD	Address:	<del>***</del>
Addiess.	FORT LAUDERDALE, FL 33316	Address.	
			100 /2 - N
			120g 3
Name and Tit	le:	Name and Title:	
Address:		Address:	<u>~~~</u> ~
			- 10 m
Name and Tit	le:	Name and Title:	
Address:			
	-		
ARTICLE VI	REGISTERED AGENT		
	ida street address (P.O. Box NOT accep	stable) of the registered agent is:	
Name:	DEBORAH FEEGER		
Address:	1287 N RIO VISTA BLVD		
	FORT LAUDERDALE, FL 33316		
ADTICI E VIII	INCORPORATOR		
	ress of the Incorporator is:		
Name:	DEBORAH FEEGER		
Address:	1287 N RIO VISTA BLVO	<del></del>	
	FORT LAUDERDALE, FL 33316		
		f process for the above stated corporation at the pi	
inis cerujicate, 1 am	i jamuuar wiin ana accepi ine appoinime	nt as registered agent and agree to act in this capac	шу
10- 4-	- DoLagas	5.21.12	
- Jacob	red Signature/Registered Agent		
* Requir	ed Signature/Registered Agent	• Date	
I submit this docun	nent and affirm that the facts stated he	rein are true. I am aware that any false informati	on submitted in a
		ree felony as provided for in s.817.155, F.S.	-
•	" ص		
Datos	a) Tracer.	5.21.12 Date	
Require	d Signature/Incorporator	Date	