P12000081647

•							
(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
L08-39868 (Document Number)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
A. LUNT							

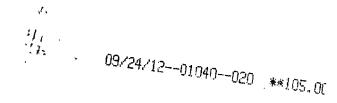
Office Use Only

SEP 26 2012

EXAMINER



000239877610



MIZ SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Food, Health & Environmental Safety LLC
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:
Ricardo Mc Queen Contact Person
Food, Healthé, Environnemal Sefety LLC Firm/Company
563 FERGUSON DR - STEL Address
City, State and Zip Code
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Ricado N. Queen at 407 495-3633
Name of Contact Person at (407) 495-3633 Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
\$105.00 Filing Fees and Certificate of Status \$\sum_{\text{\$113.75 Filing Fees}} \sum_{\text{\$113.75 Filing Fees}} \sum_{\text{\$113.75 Filing Fees}} \sum_{\text{\$1122.50 Filing Fees}} \sum_{\text{\$122.50 Filing Fees}} \text{\$Certified Copy, and Certificate of Status}
STREET ADDRESS:MAILING ADDRESS:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsClifton BuildingP. O. Box 6327

Tallahassee, FL 32314

2661 Executive Center Circle

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:
Food, Health & Environmental Safety LC
United Inchie of Outer Dubiness Patrick
Enter Name of Other Business Entity 2. The "Other Business Entity" is a Limited Liability Company For (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
on 4-21-2008
on 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:
<u> </u>
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
Food, Health & ENNVIRONMENTAL SOFETY DIC. Enter Name of Florida Profit Corporation
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: Sept. 20, 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

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting the

conversion.

Signed this 20 da	ay of Saprein	beri	, 2012	<u>-</u> .		
Individual signing affirm	r Florida Profit Corporations that the facts stated in the provided for in s.817.155, I	is document	are true. An	y false informat	ion cons	stitutes
Signature of Chairman, selected, an Incorporator Printed Name:	Vice Chairman, Director, C r: //cald //cc to MC Queerv Title!	officer, or, if	Directors or	Officers have n	ot been	
stated in this document as s.817.155, F.S. [See below	on behalf of Other Business are true. Any false informat ow for required signature(s).	tion constitut	es a third de	egree felony as p		
Signature: (Carlos)	indo Mª Queen	/	2 100			
Printed Name: Kica	udo Me Queen	_ Title:	100,00ut	•		
Signature:						
Printed Name:		_ Title:				
				N.	- E-3	
Signature:		m: I		ري ا	117	
Printed Name:		_ I itle:	<u></u>	J-13		
Signature				0.5	24	eriter a
Printed Name:		Title			t-	\$
				يراني		
Signature:				957 957		(,,,,)
Printed Name:		_ Title:			4	
				*.7	G	
Signature:		mial				
Printed Name:		_ I itie:	, na			
If Florida General Partr Signature of one General	<mark>nership or Limited Liabilit</mark> Partner.		<u>p:</u>			
If Florida Limited Partn Signatures of ALL Gener	nership or Limited Liabilit ral Partners.	y Limited Pa	rtnership:			
If Florida Limited Liabi Signature of a Member or	lity Company: Authorized Representative.					
All others: Signature of an authorized	d person.					
Fees: Certificate of Corresponding Acceptation Corresponding Certificate of States	Articles of Incorporation:	\$35.00 \$70.00 \$8.75 (Option \$8.75 (Option \$8	,			

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

RTICLE II PRINCIPAL OFFICE			
Principal <u>street</u> address 563 Fenguson D.P.	STE. L	Mailing ac	ddress, if different is:
	32805	50	ne
RTICLE III PURPOSE			
ne purpose for which the corporation is organized	zed is:		
70 conduct sci	ONTIFIC RESEA	ich and Drues rià	ation or=
All Kind of Food	Which com	assist in doto	enmituras Fi
CAIL	Francis Health	greate for the 1	industrate
RTICLE IV SHARES	TOOL FOR EXPE	onsume it.	201011 (2014)3
ne number of shares of stock is: 100	who c	onsume se.	
RTICLE V INITIAL OFFICERS ANI	NOR DIRECTORS	!	
Name and Title: Ricordo Mc Ou		Name and Title:	
Address:	2 C= /	Address:	
563 Ferguson. Orlando FL	32805		
			70.70
Name and Title:			
Address:		Address:	SS 2
Name and Wide.		Manager de Title	P. P.
Name and Title:			
			Ord 5
			, k
RTICLE VI REGISTERED AGENT			
ne name and Florida street address (P.O. Box		he registered agent is:	
	o Mi Queen		
Address: 563 Fengusur.	FL 32805		
	, _ ,		
RTICLE VII INCORPORATOR			
ne name and address of the Incorporator is: Name: Address: S63 F-aqusa Onlando F	o M'Queen		
Address: 563 Fenguson	n DR STEL		
Orlando F	- 32805		
aving been named as registered agent to accep		for the above stated corno	ration at the place designated
is certificate, I am familiar with and accept the			
Di a Med		C 20-10	
Required Signature/Registered Agent		9-20-12 Date	-
Required Signature/Registéred Agen	t	Date	
submit this document and affirm that the fact.			
cument to the Department of State constitutes		as provided for in s.817.15	55, F.S.
Grade MC Joseen	~	9-20-12	•
Required Signature/Incorporator		Date	·
Required Signature/Incorporator		Laic	