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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
<u>_</u>
PICK-UP: WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SUBJ	ECT. Favorite	e Studios Inc		,
SC DO.	Le 1	Name of R	esulting Florida Profit Cor	poration
				, and fees are submitted to convert cordance with s. 607.1115, F.S.
Please	return all corre	espondence concerning	g this matter to:	
Karen	Favorite			
		Contact Person	•	
Favor	ite Studios LL	.c		
		Firm/Company		
1117	Chokee Place	;		
		Address		
Saint.	Augustine, Flo	orida 32092		
	С	ity, State and Zip Code		
karen	favorite@me.	com		
E-	-mail address: (to	be used for future annual re	eport notification)	
For fu	rther information	on concerning this mat	ter, please call:	
Karer	n Favorite		at (904) 219	9-8030
	Name of Con	tact Person		me Telephone Number
Enclos	sed is a check f	or the following amou	nt:	
□ \$10:	5.00 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
Regist Division Clifton 2661 F	ration Section on of Corporation Building Executive Center assee, FL 3230	ions er Circle	MAILING A Registration S Division of C P. O. Box 63: Tallahassee,	Section Corporations 27

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					
Favorite Studios LLC L12600082128						
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 June 12, 2008						
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 which it is now organized, formed or incorporated:	he lav	vs of				
n/a	ALL'A	2 0EC				
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorp</u>	Dratic	on P				
Favorite Studios Inc	် ကို	PH (
Enter Name of Florida Profit Corporation	AIAIS TAIS	PH 1:27				
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 docu 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 an 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.

Signed this 3rd day of December	, 20_ 12		
Required Signature for Florida Profit Corporat	tion:		
Individual signing affirms that the facts stated in the	nis document are true. Any false inform	ation constitut	es
a third degree felony as provided for in s.817.155,			
Signature of Chairman, Vice Chairman, Director,	Officer, or, if Directors or Officers have	e not been	
selected, an Incorporator:	avera		
selected, an Incorporator: Printed Name: Gerald B Favority, JI Title:	Owner, MGRM	-	
Required Signature(s) on behalf of Other Busines			
stated in this document are true. Any false informa		s provided for	in
s.817.155, F.S. [See below for required signature(s)			
Signature: Karen Favorite Printed Name: Karen Favorite			
Printed Name. Karen Favorite	Title: Manager	-	
Trinica Name.	Title.	-	
Signature:		_	
Signature: Printed Name:	Title:	-	
Signature:		_	
Signature:Printed Name:	Title:	-	
Signature:		_	
Signature: Printed Name:	Title:	-	
Signature:			
Signature:Printed Name:	Title:	-	
Signature:			
Signature: Printed Name:	Title:	-	
If Florida General Partnership or Limited Liabili		₽0 5	
Signature of one General Partner.	ty raithership.	E SE	
If Florida Limited Partnership or Limited Liabili	ty I imited Partnership	SSV- FUND	"Ti
Signatures of <u>ALL</u> General Partners.	Confect at the iship.	期で	
		10 PM 1:27 PARY OF STATE SSEE FLORIDA	
If Florida Limited Liability Company:			
Signature of a Member or Authorized Representative	:.	以 27	
All others:			
Signature of an authorized person.			
Fees:			
Certificate of Conversion:	\$35.00		
Fees for Florida Articles of Incorporation:	\$70.00		
Certified Copy:	\$8.75 (Optional)		
Certificate of Status:	\$8.75 (Optional)		

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

1117 Chokee Place Staugustine FL 32092 Name and Title: Address: Name and Title: Address: Name and Title: Address: Name and Title: Address: The name and Address of the Incorporator is: Name and Title: Address: The mane and Address: The mane and Title: Address: The place St Augustine FL 32092 Name and Title: Address: Address: The mane and Address: The mane and Title: Address: Address: Address: The mane and Address: The mane and Title: Address: The mane and Title: Address: The mane and Florida strest address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: The mane and Address: The mane and Address of the Incorporator is: Name: Address: The mane and address of the Incorporator is: Name: Address: The mane and address of the Incorporator is: Name: Address: The mane and address of the Incorporator is: Name: Address: The mane and address of the Incorporator is: Name: Address: The mane and address of the Incorporator is: Name: Address: The mane and mane and address of the Incorporator is: Name: Address: The mane and mane a	ARTICLE I	NAME					
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Saint Augustine, Florida 32092-3459 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Photography, Printing, Design, Video and other legal business in the state of Florida ARTICLE V SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OPPICERS AND/OR DIRECTORS Name and Title: GPT AUGUSTINE TO THE GRAND	ARTICLE II	PRINCIPAL OFFICE					
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ARTICLE II PURPOSE The purpose for which the corporation is organized is: Photography, Printing, Design, Video and other legal business in the state of Florida ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Gerlaid B Favorite, Jr, President TH7 Chokee Place Address: StAugustine FL 32092 Name and Title: Address: Address: TH7 Chokee Place StAugustine FL 32092 Name and Title: Address: Address: Address: ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: TH7 Chokee Place StAugustine FL 32092 ARTICLE VII INCORPATOR The name and address of the Incorporator is: Raren Favorite Address: TH7 Chokee Place StAugustine FL 32092 Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I an familiar with and accept the appointment as registered agent and agree to act in this capacity Required Signature/Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	···						_
The purpose for which the corporation is organized is: Photography, Printing, Design, Video and other legal business in the state of Florida **RTICLE IV SHARES** The number of shares of stock is: 100 **ARTICLE V INTIAL OFFICERS AND/OB DIRECTORS** Name and Title: Gerild B Favorite, Jr, President Address: 1117 Chokee Place Address: Staugustine FL 32092 Name and Title: Karen Favorite, Vice President Address: Staugustine FL 32092 Name and Title: Address: Ad							
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