# P13000033632

(Requestor's Name)				
(Address)				
(Ad	dress)			
(City/State/Zip/Phone #)				
PłCK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



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### **COVER LETTER**

TO: Charter Section

**Division of Corporations** 

# SUBJECT: Jack Nolan & The Impression Group, 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:

## John Jack Nolan

Contact Person

Jack Nolan & The Impression Group, LLC

Firm/Company

400 South Pointe Drive, Ste. 2310

Address

Miami Beach, FL 33139

City, State and Zip Code

# jack@tigseventwow.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jack Nolan

, 305

532-6557

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$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 ADDRESS:**

Charter Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **MAILING ADDRESS:**

Charter Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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## **Certificate of Conversion**

For

## "Other Business Entity"

Into

## 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, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

# Jack Nolan & The Impression Group, LLC

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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 April 9th, 2013

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:
- 4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:

# Jack Nolan & The Impression Group, Inc.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: April 9th, 2013 (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.)

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Signed this 9th day of April	, 20 <u>13</u>		
Required Signature for Florida Profit Corporat	ion:		
Signature of Chairman, Vice Chairman, Director, &	Officer, or, if Directors or Officers has	ve not	
been selected, an Incorporator:	All holen	. • 1101	
Printed Name: John Jack Nolan Title:/	CED/PRESIDENT	_	
	<del>) / 1000</del>		
Required Signature(s) on behalf of Other Business signature(s).]	s Entity: [See below for required		
Signature: State Boles			
Printed Name: John Jack Nolan	Title: Managing inember	_	
Signature:			
Printed Name:	Title:	<del></del>	
Signature:			
Printed Name:	Title:		
Signature:		_	
Printed Name:	Title:		
Signature:		_	
Printed Name:	Title:		
Signature:			
Printed Name:		_	
If Florida General Partnership or Limited Liabilit	v Partnership:	$\mathbb{E}_{G_{i}}$	ىس. دې
Signature of one General Partner.	<del>*                                    </del>		i P
If Florida Limited Partnership or Limited Liabilit	y Limited Partnership:		7
Signatures of <u>ALL</u> General Partners.			3.70
If Florida Limited Liability Company: Signature of a Member or Authorized Representative		- STATE	= 0;
All others: Signature of an authorized person.		•	8
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)

	T NAME Jack Nolan 8		Picasion anoup, me.
The principa	l place of business/mailing address is:		
iki bi i ar gayan bumbababab	Principal street editors	ودوا والمطابق والمقارق والمقار	Mailing address, if different is:
Miami	Beach, FL 33139	the last	
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ARTICLE The purpose	for which the corporation is organized is:	egen de erwystruggy gant in trank i den erwy	agganina oro o akki i ikki sangangang pingipikipikinan oro oro ini ikki ikki saga
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A D-FTT D	of them of thek is 1,000  P DITTAL OFFICERS AND/OR DIE JOHn Jack Nolan, CEO		
Address:	John Jack Nolan, CEO 400 South Pointe Drive, Ste 2310 Miami Beach, FL 33139	Addren:	Total Company Record
	Miami Beach, FL 33139	·	The same of the sa
Nama and T		Name and Ti	
Address:		Address:	
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Address:		Address:	
RITCLE	VI REGISTERED AGENT		
ho ziaine si	ad Florida street address (P.O. Box NOT acco	puble) of the re	gistared agent is:
Verno:	Steven K Baird, P.A.		
Liddress:	5981 N E 6th Avenue		
	Miami, FL 33137		

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

John Jack Nolan

Address:

400 South Pointe Drive, Ste. 2310

Miami Beach, FL 33139

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

apacity

Required Signature/Registered Agent

April 9th, 2013

Date

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.

Requited Signature/Incorporator

April 9th, 2013

Date

SECTIONAL OF STATE