

P/3000039188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

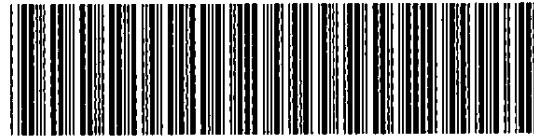
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

REMOVED "CONVERSION ORTE"  
FROM LINE #5 PER TELEPHONE  
CONVERSATION WITH MIKE  
DENNIS.

K 05/01/13

Office Use Only



000246138870

03/28/13--01031--003 \*\*105.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

13 APR 30 PM 12:43

FILED

W13-18184

K 05/01/13



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 16, 2013

MIKE DENNIS \*\*\* 2ND MAILING \*\*\*  
JMTED1 ENTERPRISES LLC  
411 FOXTAIL CT.  
KISSIMMEE, FL 34746

SUBJECT: JMTED1 ENTERPRISES, LLC  
Ref. Number: W13000018184

We have received your document for JMTED1 ENTERPRISES, LLC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Date "First Organized" listed under Line #2 of the application does not match the date listed in our records under Sunbiz.org.

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Incorporation, if any.

The document must be signed by a chairman, vice chairman, director, officer, or an incorporator, if directors or officers have not been selected.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 413A00007426

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

## COVER LETTER

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** JMTED 1 ENTERPRISES 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:

Mike Dennis

Contact Person

JMTED 1 ENTERPRISES LLC, DBA FLORIDA SUNBRIGHT

Firm/Company

411 FOXTAIL CT

Address

KISSIMMEE, FL 34746

City, State and Zip Code

www.FloridaSunbright.com

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

For further information concerning this matter, please call:

Mike Dennis

Name of Contact Person

at ( 321 ) 286-6075

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |   |   |  |
|--|---|---|--|
| <input checked="" type="checkbox"/> \$105.00 Filing Fees | <input type="checkbox"/> \$113.75 Filing Fees<br>and Certificate of<br>Status | <input type="checkbox"/> \$113.75 Filing Fees<br>and Certified Copy | <input type="checkbox"/> \$122.50 Filing Fees,<br>Certified Copy, and<br>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

FEM: 45-0585462

**Certificate of Conversion**  
For  
**"Other Business Entity"**  
Into  
**Florida Profit Corporation**

FILED  
13 APR 30 PM 12:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

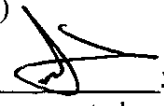
1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

JMTED1 ENTERPRISES LLC (L12-47074)

Enter Name of Other Business Entity

2. The "Other Business Entity" is a LLC  
(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 FL  
(Enter state, or if a non-U.S. entity, the name of the country)

on 04-30-12 04-05-12   
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

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

JMTED1 ENTERPRISES INC.

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.)

Signed this 21<sup>st</sup> day of March, 20 13.

**Required Signature for Florida Profit Corporation:**

Signature of Chairman, Vice ~~Chairman~~, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator SEE BELOW

Printed Name: Mike Dennis Title: Pres.

**Required Signature(s) on behalf of Other Business Entity:** [See below for required signature(s).]

Signature: X   
Printed Name: Mike Dennis Title: Pres

Signature: X J.E. Dennis  
Printed Name: Jane E Dennis Title: V. Pres

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**If Florida General Partnership or Limited Liability Partnership:**

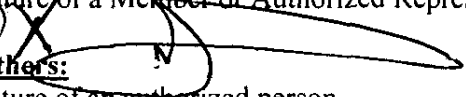
Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**If Florida Limited Liability Company:**

Signature of a Member or Authorized Representative.

(Mike) X   
**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)

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13 APR 30 PM 12:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

The name of the corporation shall be: JMTE D 1 ENTERPRISES INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address  
411 Foxtail Ct.  
Kissimmee, FL 34746

Mailing address, if different is:

Same

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Property Mgmt  
(Change from LLC to Corp-FL)

### ARTICLE IV SHARES

The number of shares of stock is: 100

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Mike Dennis Name and Title: Pres

Address: 411 Foxtail Ct Address: \_\_\_\_\_  
Kissimmee, FL 34748

Name and Title: Jane Dennis Name and Title: \_\_\_\_\_

Address: 411 Foxtail Ct Address: \_\_\_\_\_  
Kissimmee, FL 34746

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Mike Dennis

Address: 411 Foxtail Ct

Kissimmee, FL 34746

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13 APR 30 PM 12:43  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**


The name and address of the Incorporator is:

Name: Mike Dennis

Address: 411 Forktail Ct  
Kissimmee, FL 34746

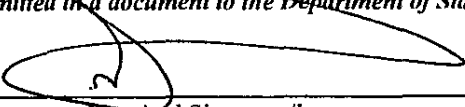
\*\*\*\*\*

*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*

X   
\_\_\_\_\_  
Required Signature/Registered Agent

03-20-13  
\_\_\_\_\_  
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.*

X   
\_\_\_\_\_  
Required Signature/Incorporator

03-20-13  
\_\_\_\_\_  
Date

FILED  
13 APR 30 PM 12:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA