# 713000044275

(Re	equestor's Name)	
(Ad	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nan	ne)
(De	ocument 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: RBrown Accounting

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:

Regina L B	rown				
	Contact Person		•		
RBrown Ac	counting				
	Firm/Company				
2813 Grass	mere Lane				
	Address				
Orlando, FL	32808				VA CATADOVER
C	ity, State and Zip Code				
info@rbrow	naccounting	j.com			Fr Fr
E-mail address: (to	be used for future annual r	eport notification)			Ţ
For further information	on concerning this ma	tter, please call:			RID/
Regina L B	rown	_ <sub>at (</sub> 407	494	1-3522	
Name of Con	tact Person	Area Code and	Daytin	ne Telephone Number	-
Enclosed is a check f	or the following amou	nt:			
■ \$105.00 Filing Fees	\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filing and Certified Copy		□\$122.50 Filing Fees Certified Copy, and Certificate of Status	š,

## **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

MRY 17 PH

# 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: R Brown Accounting 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 Florida (Enter state, or if a non-U.S. entity, the name of the country) on June 16, 2011 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: Florida 4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation: RBrown Accounting, Inc. Enter Name of Florida Profit Corporation 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 23rd day of April	, 2013	
Required Signature for Florida Profit Corporat	ion:	
Signature of Chairman, Vice Chairman, Director, Cheen selected, an Incorporator:  Printed Name: Regina L Brown  Title:	President/Director	
Required Signature(s) on behalf of Other Business signature(s).  Signature:		
Printed Name: Regina (Blown	Title: MGRM	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	_ Title:	
Signature:		
Printed Name:	_ Title:	
Signature:		
Printed Name:	_ Title:	
Signature:		
Printed Name:	Title:	
If Florida General Partnership or Limited Liabilit	y Partnership:	
Signature of one General Partner.	န္တို့ သိ	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	7 PH 2	
All others: Signature of an authorized person.	ACID. SEC. :	
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)

	E RBrown Ac		***
	NCIPAL OFFICE siness/mailing address is:		
Princip	al street address	Mailing	address, if different is:
2813 Grassi	mere Lane	<del></del>	
Orlando, FL	32808		
ARTICLE III PUR			
	he corporation is organized is:  lawful business		
<i>.</i> , a			
			_
A TOMOTOS TO TOTAL	AND		
ARTICLE IV SH	tares 100 NPV		
The number of shares of	stock is:		
ARTICLE V INIT	TIAL OFFICERS AND/OR DI	RECTORS	
ARTICLE V INIT		RECTORS  Name and Title:	
ARTICLE V INTO	TIAL OFFICERS AND/OR DI		
Name and Title:  Address:  ARTICLE V INTI	TIAL OFFICERS AND/OR DID L Brown President/Director	Name and Title:	
Name and Title: Reginal Address: Cris	TIAL OFFICERS AND/OR DID L Brown President/Director Grassmere Lane	Name and Title:	HU IS 1855 - 1958
ARTICLE V INTO  Name and Title:  Address:  Orla  Name and Title:	TIAL OFFICERS AND/OR DID L Brown President/Director Grassmere Lane ando, FL 32808	Name and Title:Address:	HU IS 1855 - 1958
ARTICLE V INTO Name and Title: Address:  Orla  Name and Title:  Address:	TIAL OFFICERS AND/OR DID L Brown President/Director Grassmere Lane Ando, FL 32808	Name and Title:  Address:  Name and Title:  Address:	SCAR ALT OF STATE
ARTICLE V INTO Name and Title: Address:  Orla  Name and Title:  Address:	TIAL OFFICERS AND/OR DID L Brown President/Director Grassmere Lane ando, FL 32808	Name and Title:  Address:  Name and Title:  Address:	HU IS 1855 - 1958
ARTICLE         V         INT           Name and Title:         Reginal           2813         Orla           Name and Title:         Address:	TIAL OFFICERS AND/OR DID L Brown President/Director Grassmere Lane Ando, FL 32808	Name and Title:  Address:  Name and Title:  Address:	SCAR ALT OF STATE
ARTICLE V INTO Name and Title: Address:  Name and Title: Address:  Name and Title: Address:	TIAL OFFICERS AND/OR DID L Brown President/Director Grassmere Lane Ando, FL 32808	Name and Title:  Address:  Name and Title:  Address:  Name and Title:	SCAR ALT OF STATE
ARTICLE V INTO Name and Title: Address:  Name and Title: Address:  Name and Title: Address:  ARTICLE VI RE The name and Florida s	GISTERED AGENT treet address (P.O. Box NOT accordance)	Name and Title:  Address:  Name and Title:  Address:  Name and Title:  Address:	EGAR STATE STATE
ARTICLE V         INTO           Name and Title:         Regina           Address:         2813           Orla           Name and Title:         Address:           Name and Title:         Address:           ARTICLE VI         RETICLE VI           The name and Florida structure:         Crystal	GISTERED AGENT	Name and Title:  Address:  Name and Title:  Address:  Name and Title:  Address:	EGAR STATE STATE

The name and address of the Incorporator is:

Name:

Regina L Brown

2813 Grassmere Lane

Orlando, FL 32808

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

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.

04/23/2013

Date

INCORPORATOR

ARTICLE VII

MAY 17 PH 2: