# P 13000055880

(Requestor's Name)		
(Address)		
(Address)		
(Cit	y/State/Zip/Phone	<del>:                                    </del>
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



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SECRETARY OF STATE PALLAHASSEE, FLORING

EFFECTIVE DATE 8-28-2012

JUL 1 - 2013 M. SOLOMON

#### COVER LETTER

TO: **Charter Section** 

**Division of Corporations** 

ALL IN SOLUTIONS 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:

ALL IN SOLUTIONS INC

BEACH, FL 334444 City, State and Zip Code

LFP 2112@GMAIL. COM

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

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

Status

■ \$105.00 Filing Fees

☑\$113.75 Filing Fees and Certificate of

□\$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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"Other Business Entity"
Into SEE 1
Florida Profit Corporation
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 🖫 🖰 🕒
accordance with s. 607.1115, Florida Statutes.
1. The name of the "Other President Entity" immediately price to the Eline of this Continues
1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
11M ALL IN SOLUTIONS LLC L12001101
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)
Muse your and a second
on <u>AUGUST 28, 2012</u> Enter date "Other Business Entity" was first organized, formed or incorporated
Enter date "Other Business Entity" was first organized, formed or incorporated
2. If the inviediction of the "Other Dusiness Entity" was should the state on country and a
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:
the laws of which it is now organized, formed of incorporated.
N/A
4. The name of the Florida Profit Corporation as set forth in the attached Articles of
Incorporation:
I'M ALL IN SOLUTIONS INC.
Enter Name of Florida Profit Corporation
E The Authority and I have been a second of the WIN I access
5. If not effective on the date of filing, enter the effective date: JULY 1, 2013.

**Certificate of Conversion** 

(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; <u>AND</u> 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 24 day of JUNE	, 20_13		
Required Signature for Florida Profit Corporati	on:		
Signature of Chairman, Vice Chairman, Director, Obeen selected, an Incorporator:  Printed Name: LUKE F PECK Title:	Officer, or, if Directors or Officers have	not	
Required Signature(s) on behalf of Other Business	Entity: [See below for required		
signature(s).]			
Signature: Printed Name: LUKE F PECK	CAMP !		
Printed Name: LUKE F PECK	Title: MEMBER		
Signature:			
Signature: Printed Name:	Title:		
Signature:			
Printed Name:	_ Title:		
Signature:			
Printed Name:			
Cimpatura			
Signature: Printed Name:	Title:		
Signature: Printed Name:	Title		
Filmed Ivalie.	_ 1 tite		
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:		
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	<del>-</del>		
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		<b>13</b>	17
All others: Signature of an authorized person.	VSSEE, F	- J PH	i T
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)	- မ - မ - မ - မ - မ - မ - မ - မ - မ - မ	O

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

The name of the corporation shall be: I'M ALL	IN SOLUTIONS INC.	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:		
Principal street address 111 STONEHARBOR WAY, A I DELRAY BEACH, FL 33444	Mailing address, if different is:	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  ANN AND ALL LAWFUL BUSIN	NESS	
ARTICLE IV SHARES		-
The number of shares of stock is:		
Name and Title: WKEF. PECK   CEO	Name and Title:	•
Address: 111 STONE HABORWAY, A1  DELRAY BEACH, FL 3344	Address:	
Name and Title:	Name and Title:	
Address:	Address:	_
Name and Title:	Name and Title:	- 
Address:	Address:	_ _ •••••
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT access)	eptable) of the registered agent is:	m
Name: LUKE F. PECK	CS w	Ö
Address: III STONE HARBOR WAY, AI	RIDA	
DELRAY BEACH, FL 3344	EFFECTIVE DATE S	28-2012

AKTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: LUXE F. PECK	,n
Address: /// STONE HAKBOR WAY, AI	AEC. 32
DELRAY BEACH, FL 33444	
	ASS.
ARTICLE VIII EFFECTIVE DATE	ří≺ mc • m
The effective date for this corporation is: July 1, 2013	
,, <u></u>	Core to the core of the core o
********************************	교육 <b>5</b> 
Having been named as registered agent to accept service of proc designated in this certificate, I am familiar with and accept the capacity	
Required Signature:	Registered Agent Date:
I submit this document and affirm that the facts stated herein as in a document to the Department of State constitutes a third deg	
Required Signature:	Incorporator Date: 6/24/13