# P13000076514

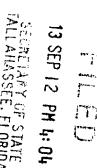
(Re	equestor's Name)	<del></del>
(Address)		
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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#### **COVER LETTER**

s.

Division of Corporations				
SUBJECT: Robert Michael &	& Company			
	Name of Resulting Florida Profit Corporation			
The enclosed Certificate of Conversion, a convert an "Other Business Entity" into a 607.1115, F.S.				
Please return all correspondence concern	ing this matter to:			
Robert Michael				
Contact Person				
Robert Michael & Co.				
Firm/Company				
Po box 622094				
Address				
Orlando Fl. 32862	۵			
City, State and Zip Code				
Robert@Robertmichael.	com			
E-mail address: (to be used for future annua	al report notification)			
For further information concerning this n	natter, please call:			
Robert M Diaz	at (407 ) 54	5-2272		
Name of Contact Person		me Telephone Number		
Enclosed is a check for the following am	ount:			
\$105.00 Filing Fees	s \$\int\$\$113.75 Filing Fees and Certified Copy	■\$122.50 Filing Fees, Certified Copy, and Certificate of Status		
STREET ADDRESS: Charter Section	MAILING A			
Division of Corporations	Division of C	Corporations		
Clifton Building	P. O. Box 63			
2661 Executive Center Circle	Tallahassee,	LL 32314		

Tallahassee, FL 32301

## **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.

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:		
Robert Michael & Company 1LC LI300012 1971.		
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 August 2013 − A 8		
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 <u>attached Articles of Incorporation:</u>		
Robert Michael & Company 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; <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 10 day of September	, 20 13	·	
<u>Requi</u>	red Signature for Florida Profit Corpor	ation:	F La	겂
Signati been so	ure of Chairman, Vice Chairman, Director, elected, an Incorporator:	Officer, or, if Directors or	Officershav	3 Set
Printed	Name: Robert M Diaz Title	: Chairman	ψ. · · · ·	
signatu		ess Entity: [See below for re	equired_STATE	
Signati	ire: RY			
Printed	Name: Robert M Diaz	Title: Member		_
Clamata				
Printed	ure:	Title		_
		1100.		-
Signatu	ıre:			
Printed	Name:	Title:		_
Printed	ıre: Name:	Title		_
Timed	Name.	1 tile		
Signatu	ire:			_
Printed	Name:	Title:		
<b>.</b> .				
Signatu	ire:	77'41		_
rrintea	Name:	1 itie:		_
If Flor	<u>ida General Partnership or Limited Liabi</u>	lity Partnershin:		
	re of one General Partner.			
	ida Limited Partnership or Limited Liabi	lity Limited Partnership:		
Signatu	ires of ALL General Partners.			
If Flor	ida Limited Liability Company:			
`	re of a Member or Authorized Representative	re.		
J	1			
All oth				
Signatu	re of an authorized person.			
Foos				
Fees:	Certificate of Conversion:	\$35.00		
	Fees for Florida Articles of Incorporation:	·		
	Certified Copy:	\$8.75 (Optional)		
	Certificate of Status:	\$8.75 (Optional)		
	Continue of Culus,	vorro (Optional)		

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

ARTICLE	EI NAME of the corporation shall be: Robert Micha	al & Com	many Inc
The name of	of the corporation shall be:	iei a con	ipany inc.
ARTICLE	E II PRINCIPAL OFFICE		
The princip	pal place of business/mailing address is:		
	Principal street address		Mailing address, if different is:
722 Patrick St	Suite 209, Kissimmee Fi. 34741	Po Box 6	22094, Orlando Fl. 32862
		•	
	E III PURPOSE		<b>*** **</b>
	se for which the corporation is organized is:		
Real	Estate Services		5 7
			N N N N N N N N N N N N N N N N N N N
	<del>-</del>		<u> </u>
			S AFE
			ATE ATE
ARTICLE  Name and	Pohort M. Diaz Chairman	RECTORS  Name and Ti	tle: Patrica M Diaz Vice Chairman
Address:	722 Patrick St. Suite 209	Address:	722 Patrick St. Suite 209
	Kissimmee Fl. 34741		Kissimmee Fl.34741
Name and	Title:	Name and Ti	tle:
Address:		Address:	
			*
Name and	Title:	Name and Ti	tle:
Address:		Address:	
ARTICLE The name :	E VI REGISTERED AGENT and Florida street address (P.O. Box NOT acce	eptable) of the re	gistered agent is:
Name:	Robert M Diaz		Ø
Address:	722 Patrick St.		
	KISSIMMEE, FL. 34741		

The name	and address of the Incorporator is:	
Name:	ROBERT M DIAZ	<del>-</del> -,
Address:	722 PATRICK ST	ALC V
	KISSIMMEE FL. 34741	AHE T
		ARY O
*******	***************	***************************************
	een named as registered agent to accept service of p I in this certificate, I am familiar with and accept the a	
	<b>7</b> 7	SEPTEMBER 10, 2013
	Required Signature/Registered Agent	Date
	this document and affirm that the facts stated herein in a document to the Department of State constitutes a	
•	Pd	SEPTEMBER 10, 2013
	Required Signature/Incorporator	Date

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