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(Red	questor's Name)	
(Address)		
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

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12/30/13--01035--003 **35.00

12/02/13--01028--016 **87.50





COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: HAYS AND ASSOCIATES, INC.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		1 ADDITIONAL CO	IPV RECIIIRED - I

OM·	JAMES W. HAYS
COIVI.	Name (Printed or typed)
	2002 GOLFVIEW DRIVE NORH
	Address
	PLANT CITY, FLORIDA 33566
	City, State & Zip
	863 604-0495
	Daytime Telephone number
	JAMESWHAYS@HOTMAIL COM

NOTE: Please provide the original and one copy of the articles.

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



Certificate of Conversion

"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: HAYS AND ASSOCIATES LLC - 1/2-101645
Enter Name of Other Business Entity
2. The "Other Business Entity" is a LIMTED 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 AUGUST 6,2012 Enter date "Other Business Entity" was first organized, formed or incorporated
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>
HAYS AND ASSOCIATES (1997), 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 14TH	_day of NOVEMBER `	, 20 13
Requi	red Signatur	e for Florida Profit Corp	poration:
Signat been s	ure of Chairm elected, an Inc	an, Vice Chairman, Directorporator:	ctor, Officer, or, if Directors or Officers have no Title: PRESIDENT
Printed	l Name: JAMES	S W. HAYS //	Title: PRESIDENT
	red Signature pre(s).]	(s) on behalf of Other Bu	siness Entity: [See below for required
Sianati	ire: Orași	es W. Lleyn	
Printed	Name/JAMES	W. HAYS	Title: PRESIDENT
Signatı	ıre:		
Printec	Name:		Title:
Signatı	ure:		
Printec	Name:		Title:
Signati	ıre:		
Printec	Name:		Title:
Signati	ıre:		
Printec	Name:		Title:
Signati	ıre:		
Printec	l Name:		Title:
		Partnership or Limited L	iability Partnership:
Signati	ure of one Gen	erai Partner.	
		<mark>Partnership or Limited Li</mark> ieneral Partners.	iability Limited Partnership:
Signau	ires of <u>ALL</u> O	ienerai Parmers.	
<u>If Flor</u> Signati	<u>ida Limited I</u> ure of a Memb	<u>Liability Company:</u> er or Authorized Represen	stative.
All oth Signati	n <mark>ers:</mark> ure of an autho	orized person.	
Fees:			
		f Conversion:	\$35.00
	Fees for Flor Certified Cop	rida Articles of Incorporat	tion: \$70.00 \$8.75 (Optional)
	Certificate of	•	\$8.75 (Optional)

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

	ARTICLES OF IN In compliance with Chapter 607 NAME corporation shall be: HAYS AND A	NCORPORATION and/or Chapter 621, F.S. (Profit)	14 10.54 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ARTICLE II	PRINCIPAL OFFICE lace of business/mailing address is:		Sy.
607 SOUTH ALEXA	Principal street address NDER STREET SUITE 205 CITY, FLORIDA 33563	Mailing address, if different is:	
• •	r which the corporation is organized is:	D CONSULTING SERVICES TO	
MULTIPI	LE CLIENTS.		-
		· · · · · · · · · · · · · · · · · · ·	_
ARTICLE IV The number of	SHARES shares of stock is:		_
ARTICLE V	INITIAL OFFICERS AND/OR DIR	RECTORS	
Name and Title	JAMES W. HAYS, PRESIDENT	Name and Title:	_
Address:	2002 GOLFVIEW DRIVE NORTH	Address:	_
	PLANT CITY, FLORIDA 33566		
Name and Title	3:	Name and Title:	_
Address:		Address:	
Name and Title	e:	Name and Title:	_
Address:		Address:	_
			_

REGISTERED AGENT

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

Name:

JAMES W. HAYS

Address:

2002 GOLFVIEW DRIVE NORTH

PLANT CITY, FLORIDA 33566

ARTICLE The name	E VII INCORPORATOR and address of the Incorporator is:	
Name:	JAMES W. HAYS	
Address:	2002 GOLFVIEW DRIVE NORTH	
	PLANT CITY, FLORIDA 33566	
**************************************	**************************************	**************************************
	in this certificate, I am familiar with and accept the a	
D	ames W. Hays	11/14/2013
	Required Signature Registered Agent	Date
	his document and affirm that the facts stated herein in a document to the Department of State constitutes a	V 2
Va	mes W. Hays	11/14/2013
//-	Required Signature Incorporator	Date