# 4UU063

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	<del></del>
(Ci	ty/State/Zip/Phone #	<del>¥</del> )
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Name	<del>)</del>
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	

Office Use Only



100260112871

05/14/14--01007--005 \*\*105.00



#### **COVER LETTER**

TO: Charter Section

Division of Corporations

# SUBJECT, CHANGE LLC TO S-CORPORATION

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:

# TAMARA PEART

Contact Person

#### AGTWORLDTAX LIMITED LIABILITY COMPANY

Firm/Company

### 1225 SUSSEX DRIVE

Address

## NORTH LAUDERALE, FL 33068

City, State and Zip Code

# patti@schneiderhammer.com

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

For further information concerning this matter, please call:

# TAMARA PEART

at (954

7983307

Name of Contact Person

Area Code and Daytime Telephone Number

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:**

New Filings Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

#### **MAILING ADDRESS:**

New Filings Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



June 13, 2014

TAMARA PEART 1225 SUSSEX DRIVE NORTH LAUDERDALE, FL 33068

SUBJECT: AGTWORLDTAX, INC. Ref. Number: W14000031002

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

You failed to make the correction(s) requested in our previous letter.

The Certificate of Conversion must be signed by an authorized person.

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.

Sylvia Gilbert Regulatory Specialist II New Filing Section

Letter Number: 514A00010531

#### **Certificate of Conversion**

· For

#### "Other Business Entity"

Into

#### Florida Profit Corporation

2014 JUL 25 PM 4:44

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:

# AGTWORLDTAX LIMITED LIABILITY COMPANY

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)
on MAY 2, 2013
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 unde 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>

WORKD 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 thisday of May	, 20 <del>[~]</del> .					
Required Signature for Florida Profit Corporation:						
Signature of Chairman, Vice Chairman, Director, been selected, an Incorporator:	FUA JUNEOU L					
Printed Name: TAMARA PEART Title:	PRESIDENT					
Required Signature(s) on behalf of Other Busines signature(s).]	s Entity: [See below for required					
Signature: DMUVE & CART Printed Name: TAMARA PEART	Title: PRESIDENT					
Signature:Printed Name:	Title:					
Signature:Printed Name:	Title:					
Signature: Printed Name:						
Signature:Printed Name:						
Signature: Printed Name:						
If Florida General Partnership or Limited Liabili						
Signature of one General Partner.						
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:					
If Florida Limited Liability Company: Signature of a Member or Authorized Representative	·.					
All others: Signature of an authorized person.						
Form						
Fees: Certificate of Conversion:	\$35.00					
Fees for Florida Articles of Incorporation:	\$70.00					
Certified Copy: Certificate of Status:	\$8.75 (Optional)					
Certificate of Status;	\$8.75 (Optional)					

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

The name of the corporation shall be: AGTWORLD	OTAX, INC.
The name of the corporation shall be.	OTAX, INC.  SECRETARY OF STATE  FAILLAHASSEE, FLORID
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	TOSEE, FLORID
The principal place of business/matting address is.	
Principal street address	Mailing address, if different is:
1225 SUSSEX DRIVE	
NORTH LAUDERDALE, FL 33068	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: TAX PREP, IMMIGRATION, ETC.	
ARTICLE IV SHARES The number of shares of stock is: 100	
ARTICLE V INITIAL OFFICERS AND/OR DEN Name and Title: TAMARA PEART, PRESIDENT	Name and Title:
Address: 1225 SUSSEX DRIVE	Address:
NORTH LAUDERDALE, FL 33068	
Name and Title:	
Address:	Address:
Name and Title:	Name and Title:
Address:	Address:
ARTICLE VI REGISTERED AGENT	

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

Name:

TAMARA PEART

Address:

1225 SUSSEX DRIVE

NORTH LAUDERDALE, FL 33068

ARTIČLI The name	E VII' INCORPORATOR and address of the Incorporator is:		4		
Name:	TAMARA PEART				
Address:	1225 SUSSEX DRIVE				
	NORTH LAUDERDALE, FL 33068				
designated capacity	een named as registered agent to accept in this certificate, I am familiar with and Required Signature/Registered Agent	accept the a	ppointment as r 	registered agent and agree to a	ct in this
	this document and affirm that the facts				
4_	in a document to the Department of State	, OHISHHALLS W		iony do provided for in biorini	