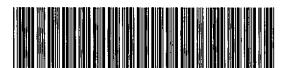
# P14000102264

(Requestor's Name)				
(Address)				
(Address)				
·				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





300266155563

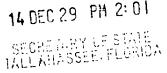
11/24/14--01027--021 \*\*122.50



W14-71425

× 2/34/14

RECEIVED
14 DEC 29 PM 2:01





#### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 1, 2014

DOROTHY JOHNSON 13154 SPRING HILL DR. SPRING HILL, FL 34609

SUBJECT: ACCIPTER WORLDWIDE, INC.

Ref. Number: W14000071425

We have received your document for ACCIPTER WORLDWIDE, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires any business entity serving in the capacity of a registered agent to have an active registration or filing on our records.

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.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 114A00025228

#### **COVER LETTER**

TO: Charter Section

**Division of Corporations** 

### Accipiter Worldwide, 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:

# **Dorothy Johnson Diversified Incorporation Service** Firm/Company 13154 Spring Hill Dr. Spring Hill, FL 34609 City, State and Zip Code

dorothy@thecorporationservice.com

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

For further information concerning this matter, please call:

## Dorothy Johnson

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$105.00 Filing Fees

□\$113.75 Filing Fees and Certificate of Status

□\$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

#### **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.

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:					
Accipter Worldwide, LLC (214-10271)					
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)					
<sub>on</sub> January 15, 2014 🗸					
Enter date "Other Business Entity" was first organized, formed or incorporated					
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:  Accipiter Worldwide, 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; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)  Page 1 of 2					

Signed this 7th day of November	, 20_/4	
Required Signature for Florida Profit Corporati	on:	
Signature of Chairman, Vice Chairman, Director, Obeen selected, an Incorporator:  Printed Name: Robert Rey  Title:	Officer, or, if Directors or Officers have not 2- President	ţ
Required Signature(s) on behalf of Other Business signature(s).]		
Signature: Aud Arg	Title: Managing Member	
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 Signature of one General Partner.	y Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.		
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	14 DEC SCRIEB ALLARS	1.1.
All others: Signature of an authorized person.	29 PH	
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)

The name of	I NAME Accipiter	Marldwide	e Inc
	I NAME f the corporation shall be: Accipiter	VOITUVIU	5, IIIC.
ARTICLE			
The principa	al place of business/mailing address is:		
	Principal street address		Mailing address, if different is:
13156 Spring Hill Dr.		PO Box 464	
Spring	Hill, FL 34609	Broo	ksville, FL 34601
The purpos	till PURPOSE e for which the corporation is organized is: and All Lawful Business	3	
ARTICLE The number	IV SHARES of stock is:		
ARTICLE			5 15 1 175
Name and	<sub>Fitle:</sub> Robert Rey PT	Name and Ti	tle: Paul Douglas VPS
Address:	27324 La Palmoma Ln	Address:	9959 Domingo Dr
	Brooksville, FL 34602		Brooksville, FL 34601
Name and	Fitle:	Name and Ti	tle:
Address:		_ Address:	
	Title:	_ Address: - Name and Ti	tle:
Address:  Name and 7  Address:	Fitle:	_	tle:

The name	E VII INCORPORATOR and address of the Incorporator is:	
Name:	Diversified Incorporation Service	
Address:	13154 Spring Hill Dr.	
	Spring Hill, FL 34609	
*******	********	********
		t service of process for the above stated corporation at the place I accept the appointment as registered agent and agree to act in this
Tole	A. Rey	10/31/14
1/0	Required Signature/Registered Agent	Date
		stated herein are true. I am aware that any false information constitutes a third degree felony as provided for in s.817.155, F.S.
	Required Signature/Incorporator	

FILED

14 DEC 29 PH I2: 16

SECFEIVE STATES

TALLARY CONTROL STATES

TALLARY C