

P15000040549

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

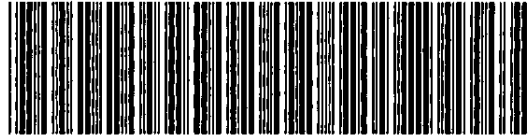
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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03/25/15--01002--003 \*\*105.00

FILED  
15 MAY -5 PM 3:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** **J.B. WOODWORKING 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:

**MICHELE PLATT**

Contact Person

**MAP ACCOUNTING SERVICES INC**

Firm/Company

**PO BOX 1329**

Address

**SANTA ROSA BEACH, FL., 32459**

City, State and Zip Code

**MAP-ACCOUNTING@MCHSI.COM**

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

For further information concerning this matter, please call:

**MICHELE PLATT**

Name of Contact Person

at **(850) 685-3681**

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 **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:

**J.B. WOODWORKING**

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 **3/10/14**

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:

**FLORIDA**

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation:**

**J.B. WOODWORKING INC**

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: **May 4, 2015**  
(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.)

15 MAY -5 PM 3:48  
RECEIVED  
FLORIDA DEPARTMENT OF STATE  
ALL CHASSEE FLORIDA

per  
cd.  
cl

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

**ARTICLE I    NAME**

The name of the corporation shall be: J.B. WOODWORKING INC

**ARTICLE II    PRINCIPAL OFFICE**

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

504 MANCHESTER ROAD

FWB, FL., 32547

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is:

CONSTRUCTION

**ARTICLE IV    SHARES** 100

The number of shares of stock is:

**ARTICLE V    INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: JOSHUA BAKER, PRES.

Name and Title: \_\_\_\_\_

Address: 504 MANCHESTER RD  
FWB, FL., 32547

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 acceptable) of the registered agent is:

Name: JOSHUA BAKER

Address: 504 MANCHESTER RD  
FWB, FL., 32547

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15 MAY -5 PM 3:48  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: MICHELE PLATT  
Address: 240 BUCK RD  
SANTA ROSA BCH, FL., 32459

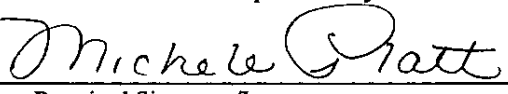
\*\*\*\*\*

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
Required Signature/Registered Agent

4/12/15  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

  
Required Signature/Incorporator

4/20/15  
Date

4/10/15

I, JOSHUA BAKER HAVE ACCEPTED TO BE THE REGISTERED AGENT FOR J.B. WOODWORKING INC.

I DO UNDERSTAND THE DUTIES AND RESPONSIBILITIES OF THE REGISTERED AGENT FOR THE J.B.  
WOODWORKING CORPORATION.

  
A handwritten signature in black ink, appearing to read 'J. Baker', is written over a solid horizontal line.

JOSHUA BAKER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 22, 2015

MICHELE PLATT \*\*2ND\*\*  
PO BOX 1329  
SANTA ROSA BEACH, FL 32459

SUBJECT: J B WOODWORKING, LLC  
Ref. Number: W15000022349

RECEIVED  
15 MAY -5 PM 1:14  
TALLAHASSEE, FLORIDA

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

The effective date can be no more than 90 days after the date of filing.

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.

Christine Haney  
Regulatory Specialist II  
New Filing Section

Letter Number: 315A00006392

FILED  
15 MAY -5 PM 3:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
Call me if Not okay  
Michele Platt  
850 685 3681