

P/500005/802

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

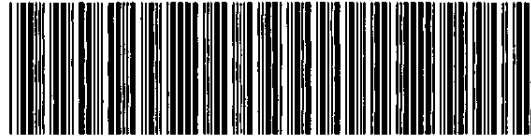
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

~~WTS-38168~~

Office Use Only



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05/27/15--01015--009 **113.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 JUN 12 PM 3:14

APPROVED
AND
FILED

1/1

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Field of Dreams Entertainment LLC
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:

Nicholas Giannola
Contact Person

Field of Dreams Entertainment LLC
Firm/Company

5182 White Egret Ln
Address

Lake land FL 33811
City, State and Zip Code

NickITMEvents02@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nicholas Giannola at (702) 945-4949
Name of Contact Person 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 29, 2015

NICHOLAS GIAMOLA
5182 WHITE EGRET LN
LAKELAND, FL 33811

SUBJECT: FIELD OF DREAMS ENTERTAINMENT INC
Ref. Number: W15000038168

We have received your document for FIELD OF DREAMS ENTERTAINMENT INC and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Incorporation, if any.

The registered agent must sign accepting the designation.

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.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 015A00011355

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

APPROVED
AND
FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Field of Dreams Entertainment LLC - LIS - 84594
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 FL. United States
(Enter state, or if a non-U.S. entity, the name of the country)

on May 13, 2015
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:

X Florida United States

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

Field of Dreams Entertainment INC
Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: ~~May 13, 2015~~ July 1st, 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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

APPROVED
AND
FILED

Signed this _____ day of _____, 20_____.

Required Signature for Florida Profit Corporation:

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Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an
Incorporator: [Signature] STATE
Printed Name: Nicholas Giannola Title: CEO TALLAHASSEE FLORIDA

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: [Signature]

Printed Name: Nicholas Giannola Title: CEO

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 Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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: Field of Dreams Entertainment INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address
5182 White Egret Ln
Lakeland FL 33811

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

S-Corporation for tax's purpose's

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TALLAHASSEE, FLORIDA

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ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Nicholas Giannola CEO Name and Title: _____

Address: 5182 White Egret Ln Address: _____
Lakeland FL 33811 _____

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: Nicholas Giannola

Address: 5182 white Egret Ln
Lake land FL 33811

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TALLAHASSEE FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Nicholas Giannola

Address: 5182 white Egret Ln
Lake land FL 33811

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

5-23-15

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

5/23/2015

Date