P15000071440

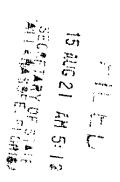
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W15-56140

Office Use Only



400275962424

08/14/15--01025--006 **113.75



AUG 28 2015 W PAINTER

ALAN J. MARCUS

ATTORNEY AT LAW

AVENTURA TITLE INSURANCE CORPORATION

Aventura Corporate Center
20803 Biscayne Boulevard, Suite 301
Aventura, Florida 33180
Telephone (305) 937-1800
Telefax (305) 937-1857
www.alanjmarcus.com

Via-fedex

August 10, 2015

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

Re: Blue Sphere Deerfield Plaza, INC

To whom it may concerned,

Please find enclosed the application for conversion of Blue Sphere Deerfield Plaza, LLC to Blue Sphere Deerfield Plaza, INC. Also find a check for \$113.75 for the filling fee and certificate of status.

Sincerely

Florina/Reznik ESQ.

FR/psm

COVER LETTER

TO:	Charter Section Division of Co.							
SUBJE	CT. Blue Sphere	e Deerfield Plaza, INC						
SOBJE		Name of	Resulting Florida	Profit	Corporation			
		e of Conversion, Article Profit Corporation" in ac			ees are submitted to conve	rt an "Ot	ther B	usines
Please 1	eturn all corres	pondence concerning this	s matter to:					
TOM D	ELAHANTY							
		Contact Person					-	
Blue Sp	here Deerfield Pl	aza, INC						
		Firm/Company						
P.O. BC	X 56855							
	,	Address						
JACKS	ONVILLE, FL 32	2241						
		City, State and Zip Code	e					
t.delaha	nty@crest-realty.	us						
E-	mail address: (t	o be used for future annu	ual report notificat	ion)				
For furt	her information	concerning this matter.	please call:					
TOM D	ELAHANTY		at (904	71693				
	Name of Co	ontact Person	Area Co	de and	Daytime Telephone Num	ber		
Enclose	d is a check for	the following amount:					_	
□ \$105	.00 Filing Fees	■\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filing and Certified Co		□\$122.50 Filing Fees, Certified Copy, and Certificate of Status	<u>*</u> :=	5	
New Fii Division Clifton 2661 Ex	T ADDRESS: lings Section of Corporation Building secutive Center ssee, FL 32301]]]	New Fi Divisio P. O. B	ING ADDRESS: illings Section on of Corporations Box 6327 assee, FL 32314		AUG 21 AH 5:	



FLORIDA DEPARTMENT OF STATE Division of Corporations

- August 24, 2015

TOM DELAHANTY PO BOX 56855 JACKSONVILLE, FL 32241

SUBJECT: BLUE SPHERE DEERFIELD PLAZA, INC

Ref. Number: W15000056140

We have received your document for BLUE SPHERE DEERFIELD PLAZA, 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):

To file a conversion in the state of Florida, either the entity being converted or the entity that is the result of the conversion must be organized, incorporated, or formed under the laws of the state of Florida. An entity organized outside the state of Florida converting to an entity also organized outside the state of Florida cannot file a conversion in Florida. In this case, the converting entity must withdraw or cancel its Florida registration. Then, if the resulting entity will be transacting business in the state of Florida, it must re-register under the correct entity type.

Please return 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.

WESTLEE A PAINTER Regulatory Specialist II

Letter Number: 115A00017781:

www.sunbiz.org

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.

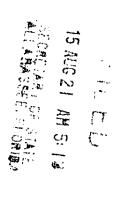
rsion is:
f which it is now
iled by the Florida of Incorporation, date will not be
f

Signed this day of Augus	, 20_/			
Required Signature for Florida Profit Corporation	<u>.</u>			
Signature of Chairman, Vice Chairman, Director, Offi Incorporator: TOM DELAHANTY Printed Name: TOM DELAHANTY Title: President Presiden		en selec	ted, aı	n
Required Signature(s) on behalf of Other Business	Entity: [See below for required signature	(s).]		
Signature:		<u></u>		
Printed Name: ALAN J. MARCUS	Title: Authorized Representative	_		
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 Signature of one General Partner.	Partnership:			
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	Limited Partnership:			
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.			15 AUG	~*
All others: Signature of an authorized person.		ASSET OF	621 AH	
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)		#2 야!	C

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

ARTICLE II PRINCIPAL OFFICE				
The principal place of business/mailing address is:				
Principal street address	Mailing addr	ess, if different is:		
12700 S. Orange Blossom	<u></u>			
0112700 S. Orange Blossom				
ARTICLE III PURPOSE				
The purpose for which the corporation is organized is: ANY AND ALL LAWFUL PURPOSES				
ANY AND ALL LAWFOL FORFOSES				-
				_
				_
				-
				_
				
				_
				_
				-
ARTICLE IV SHARES 1000				-
ARTICLE IV SHARES The number of shares of stock is:			-	_
	ECTORS			_
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIF				_
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIR Name and Title: P.O. BOX 56855	Name and Title:			_
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIR Name and Title: P.O. BOX 56855 Address:		r et just		- -
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIR Name and Title: P.O. BOX 56855	Name and Title:		8	
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIR Name and Title: P.O. BOX 56855 JACKSONVILLE, FL 32241	Name and Title:Address:	The control of the co	-	د,
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIF Name and Title: TOM DELAHANTY, President/Director P.O. BOX 56855 JACKSONVILLE, FL 32241 Name and Title:	Name and Title: Address: Name and Title:	200 (200 (200 (200 (200 (200 (200 (200	8	
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIR Name and Title: P.O. BOX 56855 JACKSONVILLE, FL 32241	Name and Title: Address: Name and Title:	1	AUG 21	
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIF Name and Title: TOM DELAHANTY, President/Director P.O. BOX 56855 JACKSONVILLE, FL 32241 Name and Title:	Name and Title: Address: Name and Title:	S 4 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	AUG 21 AK	
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIF Name and Title: TOM DELAHANTY, President/Director P.O. BOX 56855 JACKSONVILLE, FL 32241 Name and Title: Address:	Name and Title: Address: Name and Title: Address:	() () () () () () () () () ()	AUG 21 AH 5: 18	derman derman der

ARTICL	E VI REGISTERED AGENT	
The <u>name</u>	and Florida street address (P.O. Box N	T acceptable) of the registered agent is:
Name:	ALAN J. MARCUS	_
Address:	20803 BISCAYNE BLVD. SUITE 301	
	AVENTURA, FL 33180	_
ARTICL	E VII INCORPORATOR	
The <u>name</u>	and address of the Incorporator is:	
Name:	TOM DELAHANTY	
Address:	P.O. BOX 56855	
	JACKSONVILLE, FL 32241	
******	***********	*******
		ervice of process for the above stated corporation at the place designated in pointment as registered agent and agree to act in this capacity
	1010001	8/10/15
	Required Signature/Registered Agent	Date
I submit t document	his document and affirm that the facts s to the Department of Slate constitutes a	ated herein are true. I am aware that any false information submitted in a hird degree felony as provided for in s.817.155, F.S.
	MINIM	auta agent 8/10/15
	Required Signature/Incorporator	Date



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Painter, Westlee A.

From:

Florina Reznik <florina@alanjmarcus.com>

Sent:

Friday, August 28, 2015 4:00 PM

To:

Painter, Westlee A.

Subject:

blue sphere deerfield

Address: 12700 South Orange Blossom Trail, Orlando, Florida 32837

Thank you so very much!!!!!

Florina Reznik, Esq.
Aventura Title Insurance Corporation
Law Office of Alan J. Marcus
20803 Biscayne Boulevard
Suite 301
Aventura, Florida 33180
(305) 937-1800 (Phone)
(305) 937-1857 (Fax)

Email: Florina@alanjmarcus.com

HORELARY OF STATE