P15000074692

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



1/4

COVER LETTER

TO:

Charter Section

Tallahassee, FL 32301

Division of Corporations SUBJECT: DL ROPETSON CONSULTING I	^C
Name of Resulting Flor	rida Profit Corporation
The enclosed Certificate of Conversion, Articles of Incorporate Entity" into a "Florida Profit Corporation" in accordance with	
Please return all correspondence concerning this matter to:	
Debra Robertson Contact Person	
DL Robertson Consulting Firm/Company	
307 Robin Hood Lane	
Pensacola, FL 32526 City, State and Zip Code	<u></u>
D_L_Robertsin @ Yahili .com E-mail address: (to be used for future annual report notif	fication)
For further information concerning this matter, please call: Description	516-1754 a Code and Daytime Telephone Number
Enclosed is a check for the following amount:	
□ \$105.00 Filing Fees and Certificate of Status □ \$113.75 Filing Fees and Certified	
STREET ADDRESS: New Filings Section Division of Corporations Clifton Building 2661 Executive Center Circle	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



15 SEP -2 PM 3: 39

SECRETARY OF STATE PALLAHASSEE 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:				
DL Roberton Consulting, LLC 115-12026/ Enter Name of Other Business Entity				
'I de la				
2. The "Other Business Entity" is a				
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 Ally 13, 2016				
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:				
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u> DL Roberton Consulting Too. Enter Name of Florida Profit Corporation				
5. If not effective on the date of filing, enter the effective date:				
5. If not effective on the date of filing, enter the effective date: (The effective date 1) control to the file of the file o				
(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; <u>AND</u> 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.				

Signed this day of	20 15			
U				
Required Signature for Florida Profit Corporation:				
Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Will Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Will Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Will Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Will Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Will Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Will Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Will Chairman, Director, Officer, or, if Directors or Officers have not been selected, and Incorporator: Will Chairman, Director, Officer, or, if Directors or Officers have not been selected, and Incorporator: Will Chairman and Officers have not been selected, and Incorporator of the Incorporat				
Required Signature(s) on behalf of Other Business E				
Signature: Willma Kutubn				
Printed Name: Debra Ruberton	_ Title: 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 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: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)			

15 SEP -2 PH 3: 3:



APPHOVEL

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: DL Robertson	Consulting, Inc. SECRETARY OF STATE TALLAHASSEE, FLORIDA			
The principal place of business/mailing address is:	· · · · ·			
307 Robin Houd Lane Pensacola, FL 32521	Mailing address, if different is:			
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	lance and one of the of the offers			
The purpose of this Corporation is to transact any or all lawful business for which Corporations may be incorporated under Chapter 607, Florida Statutes,				
ARTICLE IV SHARES The number of shares of stock is: 100 5 MVES of 100 ARTICLE V INITIAL OFFICERS AND/OR DIRE	Dillar (#1.00) par value common stock which shall be croke designated as "Common shares."			
Name and Title: Debra L. Robertson, Director	Name and Title:			
Address: 307 Rubinhard Lane Pensacola, FL 32526	Address:			
Name and Title:	Name and Title:			
Address:	Address:			
Name and Title:	Name and Title:			
Address:	Address:			

Annual Control of the	APPROVEL			
ARTICLE VI REGISTERED AGENT	配的			
The name and Florida street address (P.O. Box NOT acceptable) of the	registered agent is:			
Name: Debra L. Robertson	15 SEP -2 PM 3: 39			
Address: 307 Robin Hood Lane	SECRETARY OF STATE TALLAHASSEE FLORIDA			
- Yensacola, FL 32526	and the state of t			
ARTICLE VII INCORPORATOR				
The <u>name and address</u> of the Incorporator is:				
Name: Debra L. Robertson				
Address: 307 Robin Hand Lane				
Pensacola, FL 32526	EFFECTIVE DATE 8/28/15			

this certificate, I am familiar with and accept the appointment as register	ed agent and agree to act in this capacity			
Required Signature/Registered Agent	Aug 28, 2015			
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.				
Webra & Rebenton	Oug 28, 2015			
Required Signature/Incorporator	y Date			