

P150000076950

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Certificates of Status \_\_\_\_\_

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COVER LETTER

TO: Charter Section  
Division of Corporations

SUBJECT: GTR CONCERT 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:

SHELDON BUCKMAN  
Contact Person

SHELDON BUCKMAN CAA PA  
Firm/Company

7398 FALLS RD WEST  
Address

BOYNTON BEACH, FL 33437  
City, State and Zip Code

SBUCKMANCAA@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SHELDON BUCKMAN at ( 561 ) 292 3353  
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

**Certificate of Conversion**  
For  
**"Other Business Entity"**  
Into  
**Florida Profit Corporation**

15 SEP 10 AM 9:56

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:

GTR CONCERT LLC

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)

on AUGUST 22, 2015 (EFFECTIVE)  
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:

N/A

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

GTR CONCERT 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.)

**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 4 day of SEPTEMBER, 2015.

**Required Signature for Florida Profit Corporation:**

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: John Reardon

Printed Name: JOHN REARDON Title: PRES

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

Signature: John Reardon

Printed Name: JOHN REARDON Title: PRES - MEMBER

Signature: Luis Grande

Printed Name: LUIS GRANDE Title: V.P. - MEMBER

Signature: Craig Teller

Printed Name: CRAIG TELLER Title: TREAS - MEMBER

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)

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**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: GTR CONCERT INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

8320 TRENT CT UNIT D  
BOCA RATON, FL 33433

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL ACTIVITY.

**ARTICLE IV SHARES**

The number of shares of stock is: 2000 SHS COMMON

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

Name and Title: JOHN REARDON P

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

Address: 8376 TRENT CT UNIT C  
BOCA RATON, FL 33433

Address: \_\_\_\_\_

Name and Title: LUIS GRANDE VP

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

Address: 544 NW 39 CIR  
BOCA RATON, FL 33431

Address: \_\_\_\_\_

Name and Title: CRAIG TELLER TREAS

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

Address: 8320 TRENT CT UNIT D  
BOCA RATON, FL 33433

Address: \_\_\_\_\_

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**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: CRAIG TELLER  
Address: 8320 TRENT CT UNIT D  
BOCA RATON, FL 33433

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: CRAIG TELLER  
Address: 8320 TRENT CT UNIT D  
BOCA RATON, FL 33433

\*\*\*\*\*

*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*

Craig Teller  
Required Signature/Registered Agent

9-3-15  
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.*

Craig Teller  
Required Signature/Incorporator

9-3-15  
Date

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AUG 10 2015