P1500082583

(Requestor's Name)				
(Address)				
(AC	iuless)			
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
<u> </u>				



OCT'0'7' 2015

C SCOTT



600271433576

05/01/15--01017--004 **30,00

06/24/15--01005--005 **105.00

15 SEP 24 AH 8: 57

COVER LETTER

Charter Section ..

2661 Executive Center Circle

Tallahassee, FL 32301

TO:

Division of Corporations
SUBJECT: /NC/TY SECURITY LLC Name of Resulting Florida Profit Corporation
The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Busines Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.
Please return all correspondence concerning this matter to:
TOHN REGINALD SIZER Contact Person
INCITY SECURITY, LLC Firm/Company
16603 SAGAMORE BRINGE WAY Address
DELRAY BEACH FLORIDA, 33446 City, State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (561) 306 9228 Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
\$105.00 Filing Fees and Certificate of Status \$\Bigcup \frac{1}{3}\frac{13.75}{13.75}\$ Filing Fees and Certified Copy Certificate of Status \$\Bigcup \frac{1}{3}\frac{13.75}{13.75}\$ Filing Fees and Certified Copy Certificate of Status
STREET ADDRESS: New Filings Section Division of Corporations Clifton Building MAILING ADDRESS: New Filings Section Division of Corporations P. O. Box 6327

06-12-20/5

Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 7, 2015

JOHN SIZER
INCITY SECURITY, LLC
16603 SAGAMORE BRIDGE ROAD
DELRAY BEACH, FL 33446

SUBJECT: INCITY SECURITY, LLC Ref. Number: W15000034054

We have received your document for INCITY SECURITY, LLC and your check(s) totaling \$135.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

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.

Letter Number: 815A00013756

Tyrone Scott Regulatory Specialist II New Filings Section

www.sunbiz.org

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

This Certificate of Conversion <u>and attached Articles of Incorporation</u> 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:
INCITY SECURITY I I C - (1) (DA) (1) 224
INCITY SECURITY, LLC - LJ20W142374 Enter Name of Other Business Entity
2. The "Other Business Entity" is a LIMITED MABILITY CORPORATION (Enter entity type. Example: limited liability company, united 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 $1/-09-2012$
on
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 attached Articles of Incorporation:
INCITY SECULPITY INC
INCITY SECURITY INC Enter Name of Florida Profit Corporation 09-29-2015
5. If not effective on the date of filing, enter the effective date: 05-13-20/5
(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 1274 day of JUNE	, 20 <u>/5</u>			
Required Signature for Florida Profit Corporation:				
Signature of Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Printed Name: SIZER Title: MGRM				
Required Signature(s) on behalf of Other Business En	ntity: [See below for required signature(s)).]		
Signature:	-			
Printed Name: JOHN SIZER	Title: PRESIDENT, DIRECTOR	R, TREASURER		
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)			

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:/NC/TY S	ECURITY, INC	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:		
Principal street address 2711 VISTA PARKWAY	Mailing address, if different is: 16603 SAGAMORE BRA	DGE WAY
UNIT B-16	DELRAY BEACH	
WEST PALIN BEACH 33411 F	L. 33446 FLORIDA	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	-	
ANY AND/OR LAWFUL B	BUSINESS	_
	·	
	· .	_
		_
	SE SE	
	EF 21	san di
ARTICLE IV SHARES The number of shares of stock is: 100	1775 	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS		
Name and Title: JOHN SIZER	Name and Title:	·
Name and Title: JOHN SIZER PRESIDENT, DIRECTOR, TREF Address: 16603 SAGAMORE BRIL	XBddress:	
WAY DELRAY BEACH, 3	13.446	
Name and Title:	Name and Title:	_
Address:	Address:	
Name and Title:	Name and Title:	
Address:	Address:	

ARTICLE	VI REGISTERED AGENT	
	nd Florida street address (P.O. Box NOT accepta	ole) of the registered agent is:
Name:	JOHN SIZER	
Address: _	16603 SAGAMORE BRIDGE	FWAY
<u>«</u>	DELRAY BEACH 33446	FLORIDA
ARTICLE The name ar	VII INCORPORATOR nd address of the Incorporator is:	
_	JOHN SIZER	
Address: _	16603 SAGAMORE BRI	OCE WAY
-	16603 SAGAMORE BRI DELRAY BEACH 33446	FLORIDA
*****	*************	**********
		ocess for the above stated corporation at the place designated in as registered agent and agree to act in this capacity
	Rejulited Signature/Registered Agent	06-12-2015 Date
I submit this	document and affirm that the facts stated herein the Department of State constitutes a third degree	are true. I am aware that any false information submitted in a follow as provided for in \$ 817.155. F.S.
	Sold Sold State Constitutes a linia degree	_
R	Required Signature/Incorporator	<u>06-12-205</u> Date