

P15000088720

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

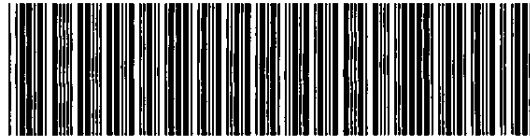
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500278291965

10/23/15--01019--024 **122.50

FILED
15 OCT 23 PM 1:45
CLERK OF STATE
TALLAHASSEE, FLORIDA

J 10/29/15

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: LP's Pub, 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:

Michele M. Broward

Contact Person

LP's Pub

Firm/Company

904 McMullen Booth Rd

Address

Clearwater, FL 33759

City, State and Zip Code

londonsbg@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michele M. Broward at (727) 916-1557

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

SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

15 OCT 23 PM 1:45

FILED

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

FILED

15 OCT 23 PM 1:45

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:

LP's Pub, LLC

Enter Name of Other Business Entity L14000166099

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 FL
(Enter state, or if a non-U.S. entity, the name of the country)

on 10/24/14
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**:

LP's Pub, INC

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: N/A

(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 21st day of October, 20 15.

Required Signature for Florida Profit Corporation:

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

X Incorporator: Michele M. Broward

Printed Name: Michele M. Broward Title: President

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

X Signature: _____

Printed Name: Michele M. Broward Title: President

Signature: Michele M. Broward

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)

FILED
15 OCT 23 PM 1:45
CLERK OF DISTRICT COURT
JANUARY 15, 2015

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

FILED

15 OCT 23 PM 1:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: LP's Pub, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

904 McMullen Booth Rd.
Clearwater, FL 33759

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To conduct all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michele M. Broward, P Name and Title: _____

Address: 904 McMullen Booth Rd. Address: _____
Clearwater, FL 33759

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: Michele M. Broward

Address: 904 McMullen Booth Rd
Clearwater, FL 33759

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Michele M. Broward

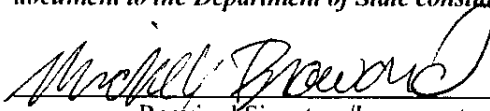
Address: 904 McMullen Booth Rd.
Clearwater, FL 33759

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

x 
Required Signature/Registered Agent

10/21/14
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.

x 
Required Signature/Incorporator

10/21/14
Date

FILED
15 OCT 23 PM 1:45
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA