(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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W16-17319



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MAR 4 2016 S. GILBERT



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 18, 2016

JESSICA L. BARRERO 815 W. BOYNTON BEACH BLVD, APT 8102 BOYNTON BEACH, FL 33426

SUBJECT: JESSICA LYNN PHOTOGRAPHY & DESIGN, INC.

Ref. Number: W16000012319

We have received your document for JESSICA LYNN PHOTOGRAPHY & DESIGN, INC. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

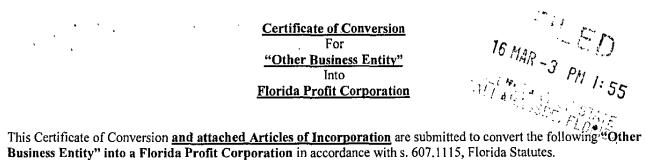
Sylvia Gilbert Regulatory Specialist II New Filing Section

Letter Number: 916A00003430

COVER LETTER

Division of	f Corporations	*		
SUBJECT: Jessica	Lynn Photography & Design, I	LLC		
5 0101 01	Name of	Resulting Florida	Profit C	orporation
	ficate of Conversion, Article ida Profit Corporation" in ac			s are submitted to convert an "Other Business 5, F.S.
Please return all co	rrespondence concerning thi	s matter to:		
Jessica L Barrero				
	Contact Person		-	
Jessica Lynn Photog	raphy & Design LLC			
	Firm/Company		-	
815 W Boynton Bea	ch Blvd Apt 8102			
	Address		-	
Boynton Beach, Fl 3	3426			
	City, State and Zip Cod	le	_	
jessi1120@aol.com				
E-mail addres	ss: (to be used for future ann	ual report notifica	ition)	
For further informa	ation concerning this matter,	please call:		
Jessica L Barrero		at (⁵⁶¹	379-773	31
Name	of Contact Person		ode and I	Daytime Telephone Number
Enclosed is a check	c for the following amount:			
■ \$105.00 Filing I	Fees \$\Bigsigs\$	□\$113.75 Filin and Certified C	ору (□\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRE New Filings Section Division of Corpor Clifton Building 2661 Executive Ce	on Pations		New Fill Division P. O. Bo	NG ADDRESS: ings Section of Corporations ox 6327 ssee, FL 32314

Tallahassee, FL 32301



Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately pri	or to the filing of this Certificate of Conversion is:
Jessica Lynn Photography & Design, LLC	
Enter Name of Ot	her Business Entity
2. The "Other Business Entity" is a Limited Liability Compan	у .
(Enter entity type. Example: limited general partnership, common law or	liability company, limited partnership,
first organized, formed or incorporated under the laws of	rida
(Enter state, or if a non-U.S. e	entity, the name of the country)
08/19/2014	
on Enter date "Other Business Entity" was	s first organized, formed or incorporated
3. If the jurisdiction of the "Other Business Entity" was char organized, formed or incorporated:	nged, the state or country under the laws of which it is now
4. The name of the Florida Profit Corporation as set forth in	the attached Articles of Incorporation:
Jessica Lynn Photography & Design, Inc	
Enter Name of Flori	da Profit Corporation
5. If not effective on the date of filing, enter the effective da	01/01/2016 te: .
(The effective date: 1) cannot be prior to nor more than? Department of State; AND 2) must be the same as the effeif an effective date is listed therein.) Note: If the date inserted in this block does not meet the approximation.	90 days after the date this document is filed by the Florida

Page 1 of 2

Signed this 2nd day of February	<u>, 20 16.</u>
Required Signature for Florida Profit Corporation:	
Signature of Chairman, Vice Chairman, Director, Office Incorporator: Session Chairman, Director, Office Printed Name: Ottosica Coursest Title: Pris	cer, or, if Directors or Officers have not been selected, an
Required Signature(s) on behalf of Other Business l	Entity: [See below for required signature(s).]
Signature: Jestica & Barrero	
Printed Name: Tessica L. Barrero	_ Title: President
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.	
All others: Signature of an authorized person.	
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)

	SOF INCORPORATION ter 607 and/or Chapter 621, F.S.	(Dwofit)
in companies with Chap	er 607 and/or Chapter 621, F.S	. (Profit)
ARTICLE I NAME The name of the corporation shall be: Jessica Lynn Photog	raphy & Design, Inc	(Profit) (Pr
ARTICLE II PRINCIPAL OFFICE		
The principal place of business/mailing address is:	•	13 1 STATE PLOSIDA
Principal street address	Mailing add	ress, if different is:
815 W Boynton Beach Blvd, Apt 8102		
Boynton Beach, FI 33426		
ARTICLE III PURPOSE		
The purpose for which the corporation is organized is:		
The purpose of the corporation is to engage in any lawful act	ivity for which corporations may be	incorporated in the state of Flo
		<u> </u>
	•	
		
		<u></u>
ARTICLE IV SHARES The number of shares of stock is: 100.00		
		
ARTICLE V INITIAL OFFICERS AND/OR DI	RECTORS	
Name and Title: Jessica L Barrero, President	Name and Title:	
Address: 815 W Boynton Beach Blvd, Apt 8102	Address:	
Boynton Beach, Fl 33426		
Name and Title:	Name and Title:	
Address:	Address:	
		
Name and Title:	Name and Title:	
Address:	A 11	

ARTICL	E VI - REGISTERED AGENT	
The <u>name</u>	and Florida street address (P.O. Box NO	Γ acceptable) of the registered agent is:
Name:	Jessica L Barrero	
Address:	815 W Boynton Beach Blvd, Apt 8102	
	Boynton Beach, Fl 33426	
ARTICLE		
	and address of the Incorporator is:	,
Name:	Jessica L Barrero	
Address:	815 W Boynton Beach Blvd, Apt 8102	
	Boynton Beach, Fl 33426	
I submit th	Required Signature/Registered Agent with and accept the app Required Signature/Registered Agent wis document and affirm that the facts sta	wice of process for the above stated corporation at the place designated in ointment as registered agent and agree to act in this capacity OZ OZ IV Date ed herein are true. I am aware that any false information submitted in a ird degree felony as provided for in s.817.155, F.S. OZ OZ IV Date

	2/29/16
	to whom it may concern:
]	
	As per a conversation last
	week' with your office, I have
	sent my proof of payment of
	mu combanus annual report
	I am attaching a printed
	email as my redelpt Please
İ	process my companys
	corporation. The payment
	Por this was already received
	and processed by your office
	Thank you Kindly, Jessicalynn Barrero Bei-379-7731
	Jessicalynn Barrero
	Del. 379-7731
	Jessi1120@aol.com

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