# P16000033765

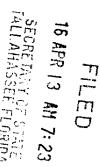
(Re	equestor's Name)	" <b>.</b>
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
WH6	<del>23</del> 959	

Office Use Only



400283649884

03/28/16--01012--016 \*\*113.75



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#### COVER LETTER

TO:	Charter Section Division of Cor					
SUBJ	Auto Parts X	-				
, SODO	LC1	Name of	Resulting Flo	rida Profit (	Corporation	
		e of Conversion, Articles Profit Corporation" in ac			ees are submitted to convert an "Other Busines 15, F.S.	SS
Please	e return all corresp	ondence concerning this	matter to:			
Fadi S	akr					
		Contact Person	<del></del>	<del></del>		
Auto I	Parts Xtreme, Inc					
		Firm/Company				
4208 1	Baymeadows Rd					
		Address				
Jackse	onville, Fl 32217					
*****		City, State and Zip Code	9	1		
accou	nting@apxengines.o	com				
	E-mail address: (t	o be used for future annu	ial report not	ification)		
For fu	erther information	concerning this matter,	please call:			
Fadi S	Sakt		_at (	717-68 )		
	Name of Co	ontact Person	Ar	ea Code and	d Daytime Telephone Number	
Enclo	osed is a check for	the following amount:	,			
<b>5</b> \$1	05.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	15\$113.75 and Certifie		□\$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



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 31, 2016

• • •

FADI SAKR 4208 BAYMEADOWS RD JACKSONVILLE, FL 32217

SUBJECT: AUTO PARTS XTREME LLC

Ref. Number: W16000023959

We have received your document for AUTO PARTS XTREME LLC and your check(s) totaling \$113.75. 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.

The names of the owners or stockholders of a corporation are not required to be filed with the Division of Corporations. To make changesin the officers, directors, or registered agent, please note the changeson the annual report. The annual report can be filed online at www.sunbiz.org. Please note the applicable filing fee.

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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.

Valerie Herring

Regulatory Specialist II New Filing Section

Letter Number: 616A00006625

www.sunbiz.org

Division of Corporations - P.O. ROY 6327 Tallahasson, Florida 3231

#### Certificate of Conversion

For

#### "Other Business Entity"

Into

#### Florida Profit Corporation

### FILED

16 APR 13 AM 7: 23

SECRETARY OF STATE TALLAHASSEE FLORIDA

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:
Auto Parts Xtreme LLC L14-194220
Enter Name of Other Business Entity
2. The "Other Business Entity" is a limited liability corporation
(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
(Enter state, or if a non-U.S. entity, the name of the country)
1/1/2015 on
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:  A. The same of the Floride Profit Comparation as set forth in the attached Articles of Incorporation:
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
Auto Parts Xtreme, Inc.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date:  (The effective date: 1) corner to nor more than 90 days after the date this document is filed by the Florida.
(The effective date: 1) cannot be prior to not more than 50 days after the date this document is fined by the Fibrial
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 day of March	, 20 <sup>16</sup>	FILED
Required Signature for Florida Profit Corporation	•	
		16 APR 13 AM 7: 23
Signature of Chairman, Vice Chairman, Director, Offi Incorporator:	icer, or, if Directors or Officers have	nos been selected van STATE TALLAHASSEE FLORIDA
Incorporator: Tudi Printed Name: Fadi Sakr Title: Vice P	resident	- MELMINGUEL PERMOP
Required Signature(s) on behalf of Other Business		
Signature: Fach' R		<u> </u>
Printed Name: FAD: SAMO	_ Title: Vice preside	<u></u>
Signature:	· · · · · · · · · · · · · · · · · · ·	
Printed Name:	Title:	<del></del>
Signature:		
Printed Name:	Title:	<del></del>
Signature:		·
Printed Name:	Title:	<del></del>
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
If Florida General Partnership or Limited Liability Signature of one General Partner.	y Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	y Limited Partnership:	
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:	\$35.00 \$70.00	
Certified Copy:	\$8.75 (Optional)	
Certificate of Status:	\$8.75 (Optional)	

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

ARTICLE I NAME Auto Borto Viramo Ino	16 APR 13 AM 7: 23
The name of the corporation shall be:  Auto Parts Xtreme, Inc.	SECRETARY OF STATE
ARTICLE II PRINCIPAL OFFICE	TALLAHASSEE FI.ORIDA
The principal place of business/mailing address is:	
Principal street address 4208 Baymeadows Rd	Mailing address, if different is:
Jacksonville, FL 32217	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	
ANY AND ALL LAWFUL BUSINESS	
ARTICLE IV SHARES 100	
The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIR	ECTORS
Name and Title: Jamell Adams- President	Fadi Sakr-Vice President Name and Title:
4208 Baymeadows Rd Address:	4208 Baymeadows Rd Address:
Jacksonville, FL 32217	Jacksonville, FL 32217
Name and Title:	Name and Title:
Address:	Address:
Name and Title:	Name and Title:
Address:	Address:

	e and Florida street address (P.O. Box NO)	Γ acceptable) of the registered agent is: FILED	
Name:	Fadi Sakr		
Address:	4208 Baymcadows Rd	16 APR 13 AM 7: 23	
Addicss.	Jacksonville, FL 32217	SECRETARY OF STAYE FALLAHASSEE FLORIDA	
<u>ARTICL</u>			
The <u>name</u>	e and address of the Incorporator is:		
Name:	Fadi Sakr		
Address:	4208 Baymeadows Rd		
	Jacksonville, FL 32217		
******* Having be this certifi	****************************** een named as registered agent to accept serv icate, I am familiar with and accept the appo	**************************************	l in
Ju	id C	3/22/2016	
	Required Signature/Registered Agent	Date	
I submit to document	his document and affirm that the facts state to the Department of State constitutes a thin	ed herein are true. I am aware that any false information submitted in rd degree felony as provided for in s.817.155, F.S.	n a
Fue	d'()	3/22/2016	
	Required Signature/Incorporator	Date	

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