## P16000040119

(Re	equestor's Name)		
(Address)			
(Address)			
(Cit	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL.	
(Bu	siness Entity Nar	me)	
(Do	ocument Number)		
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			
·			

Office Use Only



900285112119

900285112119 05/02/16--01040--005 \*\*105.00

SECRETARY OF ST

FILED



## **COVER LETTER**

c

	er Section ion of Cor	ı rporations					
SUBJECT.	R CUSTO	OMS FOOD TRUCK AND	TRAILE	R, INC			
SUBJECT:_				g Florida Pro	ofit (	Corporation	
		e of Conversion, Article: Profit Corporation" in ac				ees are submitted to convert an "Other Busine 15, F.S.	SS
Please return :	all corresp	ondence concerning this	s matter t	lo:			
GRACE HERN	NANDEZ						
		Contact Person		<del> </del>			
GRACE HERN	NANDES						
		Firm/Company					
14820 WHITE	E MAGNO	LIA CT					
		Address					
ORLANDO, F	FL 32824						
		City, State and Zip Code	2				
GHERNANDE	EZ84@HO	TMAIL.COM					
E-mail a	iddress: (t	o be used for future annu	ial report	t notification	1)		
For further inf	formation	concerning this matter,	•				
GRACE HERN	NANDEZ		_at (	) 24	17-23	389	
N	ame of Co	ontact Person		Area Code	and	Daytime Telephone Number	
Enclosed is a	check for	the following amount:					
<b>■</b> \$105.00 Fi	ling Fees	□\$113.75 Filing Fees and Certificate of Status		.75 Filing Fe rtified Copy		□\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
STREET AD New Filings S Division of Co Clifton Buildi 2661 Executiv	lection orporation ng			Nev Div P. (	w Fi visic O. B	ING ADDRESS: illings Section on of Corporations Box 6327 assee, FL 32314	

Tallahassee, FL 32301

<u>Certificate of Conversion</u>

For

"Other Business Entity"

Into

Florida Profit Corporation

FILED

, 1 kg

16 HAY -2 PH 3: 15

This Certificate of Conversion and attached Articles of Incorporation are submitted to converging following Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes SEE FLORIDA

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
JR CUSTOMS FOOD TRUCK AND TRAILER, LLC \( \bigcup_{16} - 69260
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)
APRIL 07, 2016
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:
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
J R CUSTOMS FOOD TRUCK AND TRAILER, INC
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date:  (The effective date: 1.5. If not effective date is a second of the date of filing in 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.

Page 1 of 2

Signed thisday of		, 20	- FILED
			' 'LEU
Required Signature for Florida Profit Corporation:  Signature of Chairman, Vice Chairman, Director, Officencerporator:  Printed Name: WILFREDO GUILBE COLTITle: PRESI	cer, or, if Di 2 DENT	irectors or Officers ha	16 MAY -2 PM 3: 15 ve nos been selected, an FALLAHASSEE FLORIDA
Required Signature(s) on behalf of Other Business	Entity: [Se	ee below for required s	ignature(s).]
Signature: Walfulo Muille 6			
Printed Name: WILPREDO GUILBE COLON	Title:	MGZ	
Signature:			
Printed Name:	Title:		<del></del>
Signature:			
Printed Name:	Title:	Palant Mai	
Signature:			
Printed Name:	Title:		<u> </u>
Signature:	<del></del> -		
Printed Name:	Title:		<u></u>
Signature:			
Printed Name:	Title:		· · · · · · · · · · · · · · · · · · ·
If Florida General Partnership or Limited Liability Signature of one General Partner.	/ Partnersh	ip:	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	Limited Pa	artnership:	
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 (O)		

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

FILED 16 MAY -2 PM 3: 15

RTICLE I	NAME	L B CHETOME FOOD TRUCK AND TRAILE

POTICION AND PRINCIPAL OFFICE	TALLAHASSEE FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	TOTE LITURIDY
Principal street address 2805 BLIND OWL DR.	Mailing address, if different is:
ORLANDO, FL 32822	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRE	
home and Title: WILFREDO GUILBE COLON - PRESIDEN	Name and Title:
2805 BLIND OWL DRIVE	A ddworer
ORLANDO, FL 32822	Address.
me and Title:	Name and Title:
ldress:	Address:
Same and Title:	Name and Title:
Address:	Address:

	e and Florida street address (P.O. Box NOT accept	able) of the registered agent is:
) inter	GRACE HERNANDEZ	FILED
Address:	14820 WHITE MAGNOLIA CT	FILED  16 MAY -2 PM 3: 15
	ORLANDO, FL 32824	SECRETARY OF STATE TALLAHASSEE FLORIDA
ARTICL ie name	E VII INCORPORATOR e and address of the Incorporator is:	
: ane:	WILFREDO GUILBE COLON	
/ Idress:	2805 BLIND OWL DRIVE	
	ORLANDO, FL 32822	
* + ****** Having be this certifi	**************************************	**************************************
1	(( Ulimb	04/28/16
	Required Signature/Registered Agent	Date
	this document and affirm that the facts stated herei to the Department of State constitutes a third degre	a are true. I am aware that any false information submitted in a e felony as provided for in s.817.155, F.S.
	Welfardo Hulles 6	04/28/16
	Required Signature/Incorporator	Date