# P16000041993

(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:
-  -  -
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STREET AND STATE

W16-029252 05/16/12



## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 20, 2016

ERICA HETHERINGTON P.O. BOX 2492 RIVERVIEW, FL 33568

SUBJECT: HETHERINGTON SERVICES, LLC

Ref. Number: W16000029252

We have received your document for HETHERINGTON SERVICES, LLC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must submit Articles of Incorporation for a Florida profit corporation along with the Certificate of Conversion. The Articles of Incorporation must be signed by an incorporator.

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.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 016A00008157

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## **COVER LETTER**

Division of Co	rporations				
SUBJECT. HETHERI	NGTON SERVICES INC.				
SUBJECT.	Name of	Resulting Florida	Profit	Corporation	
	te of Conversion, Article Profit Corporation" in ac			ees are submitted to convert a	n "Other Business
Please return all corres	pondence concerning this	s matter to:			
ERICA HETHERINGTO	ON				
	Contact Person		_		
HETHERINGTON SER	VICES				
	Firm/Company		-		
PO BOX 2492					
	Address		-		
RIVERVIEW FL 33568					
	City, State and Zip Code	e	-		
HETHSERVE@GMAIL	.COM				
E-mail address: (1	o be used for future annu	ual report notifica	tion)		
For further information	concerning this matter,	please call:			
ERICA HETHERINGTO	ON	at ( 813	810-8	035	
Name of Co	ontact Person		ode and	l Daytime Telephone Numbe	r
Enclosed is a check for	the following amount:				
■ \$105.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filin and Certified Co	_	□\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS: New Filings Section Division of Corporation Clifton Building 2661 Executive Center	ns		New F Division P. O. E	ING ADDRESS: illings Section on of Corporations Box 6327 assee, FL 32314	

Tallahassee, FL 32301

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

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:
HETHERINGTON SERVICES, LLC
(LB - 087241) Enter Name of Other Business Entity
2. The "Other Business Entity" is a
(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)
01//5/2013
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 attached Articles of Incorporation:
HETHERINGTON SERVICES INC
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter 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

18 3: LF

Signed thisday of	, 20	
Required Signature for Florida Profit Corporation		
Signature of Chairman, Vice Chairman, Director, Off Incorporator V SUPPRINTED Printed Name: ERICA (HETHERING TO Ne: Printed Name: PRICA (HETHERING TO Ne: Printed Name: Pr	icer, or, if Directors or Officers have not beer	ı selected, an
Required Signature(s) on behalf of Other Business	Entity: [See below for required signature(s]	).]
Signature: X SHERM		
Printed Name: ERICA HETHERING	700 Title: PRESTDENT	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
<mark>If Florida General Partnership or Limited Liabilit</mark> Signature of one General Partner.	y Partnership:	
<b>If Florida Limited Partnership or Limited Liabilit</b> Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		
All others: Signature of an authorized person.		minds COD
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)	1.8 kg cl
	Page 2 of 2	<b>造</b> 、 憲

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

ARTICLE II PRI	NCIPAL OFFICE Principal street address	Mailing address, if	different is:		
10504 Anglecrest Drive		PO Box 2492			
Riverview, FL 3356		Riverview, FL 33568			
ARTICLE III PUR The purpose for which	POSE Any are the corporation is organized is:	nd all lawful business			
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ARTICLE IV SHA					
The number of shares  ARTICLE V INIT	of stock is: '  TAL OFFICERS AND/OR DIRECTOR	SName and Title:			
The number of shares  ARTICLE V INIT  Name and T  Address	of stock is:  CIAL OFFICERS AND/OR DIRECTOR itle:  PO Box 2492  Riverview, FL 33568	Name and Title:  Address:  Name and Title:  Address:			



Name a	nd Title:	Name and Title:	
Addres	s	Address:	
	REGISTERED AGENT Florida street address (P.O. Box NOT accep	table) of the registered agent is:	
Name:	Erica Hetherington		
Address:	10504 Anglecrest Drive		, s
	Riverview, FL 33569		
RTICLE VII	INCORPORATOR		3
he <u>name and a</u>	ddress of the Incorporator is:		100 mg
Name:	Erica Hetherington		
Address:	10504 Anglecrest Drive		الترقيق المتا
11441000	Riverview, FL 33569		• •
ffective date, if If an effective ays after the f	_		ess days prior or 90 business
	e inserted in this block does not meet the appetfective date on the Department of State's re		its, this date will not be listed as
	med as registered agent to accept service of am familiar with and accept the appointmen		
ර	Herry		5/9/2016
	Required Signature/Registered Ag	ent	Date
	cument and affirm that the facts stated her Department of State constitutes a third degr		
57	4the		5/9/2016
Requ	ired Signature/Incorporator		Date