

P16000056566

(Requestor's Name)

(Address)

(Address)

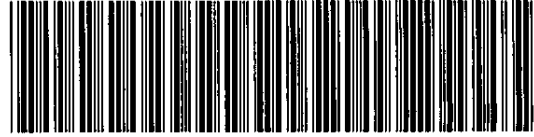
(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



900287079759

06/28/16--01017--002 **105.00

Special Instructions to Filing Officer:

Thomas Freese GAVS
AUTHORIZATION BY PHONE TO
CORRECT *purpose & insert Title*
DATE *7-8-16*
DOC. EXAM. *[Signature]*

Office Use Only

16 JUN 28 PM 2:00
[Vertical stamp text]

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

16 JUN 28 2:00 PM '16
FILED
STATE OF FLORIDA
TALLAHASSEE

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:
Immanuel Frazier LLC

Enter Name of Other Business Entity

2. The "Other Business Entity" is a LLC
(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)

on 4/18/2016
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 **attached Articles of Incorporation**:
Immanuel Frazier, P.A.

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.

Signed this 23rd day of June, 2016.

Required Signature for Florida Profit Corporation:

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

Incorporator: Immanuel Frazier
Printed Name: Immanuel Frazier Title: _____

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

Signature: Immanuel Frazier
Printed Name: Immanuel Frazier Title: member

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 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)

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

ARTICLE I NAME Immanuel Frazier, P.A.

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

Principal street address
400 Leslie Drive Unit 817

Hallandale Beach, FL 33009

Mailing address, if different is: _____

16 JUN 28 PM 2:00

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Corporation Realtor

ARTICLE IV SHARES 100

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Immanuel Frazier ^{PST} Name and Title: _____

Address: Same Address: _____

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: Immanuel Frazier
Address: 400 Leslie Dr Unit 817
Hallandale Beach FL 33009

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Immanuel Frazier
Address: 400 Leslie Dr Unit 817
Hallandale Beach FL 33009

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

Immanuel Frazier
Required Signature/Registered Agent

6/23/16
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.

Immanuel Frazier
Required Signature/Incorporator

6/23/16
Date