# P16000066560

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· (D)	<b></b>	
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Certified Copies	Certificate	s of Status
Special Instructions to Fili	ng Officer:	
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T 08/12/16

#### Feigenbaum + Uddo, LLC

COUNSELORS AT LAW

July 26, 2016

#### Overnight Mail

New Filings Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: <u>Eutychus Productions, Inc.</u>

Dear Sir/Madam:

Enclosed please find a Certificate of Conversion and Articles of Incorporation pertaining to the above-referenced entity for fling. Also enclosed please find a check in the amount of \$105.00, in payment of the filing fee.

If you should have any questions, please feel free to contact me.

Very truly yours,

Eleanor M. Uddo

EMU:cw Enclosure

Richard A. Feigenbaum, Esq. Eleanor M. Uddo, Esq.

Playhouse Square 386 Washington Street Wellesley, MA 02481

- [1] 781.237.9900
- [f] 781 237.9901
- [e] raf@elderlaw.com emu@elderlaw.com

#### ' COVER LETTER

	harter Section Pivision of Co					
SUBJEC	T. Eutychus	Productions, Inc.				
SOBJEC		Name of	Resulting Flor	da Profi	Corporation	
		te of Conversion, Article Profit Corporation" in a			fees are submitted to convert an "	Other Busines
Please ret	urn all corres	pondence concerning th	is matter to:			
Eleanor M	. Uddo, Esq.					
	· · · · · · · · · · · · · · · · · · ·	Contact Person		<del></del>		
Feigenbau	m & Uddo, LI	.c				
		Firm/Company				
386 Washi	ngton Street					
		Address		<del></del>		
Wellesley,	MA 02481					
		City, State and Zip Cod	e	_		
emu@elde	rlaw.com					
E-m	ail address: (1	to be used for future ann	ual report notifi	cation)		
For furthe	r information	concerning this matter,	please call:			
Eleanor M	. Uddo		_at (	237-9	900	
	Name of Co	ontact Person	Area	Code and	Daytime Telephone Number	
Enclosed i	s a check for	the following amount:				
<b>\$105.00</b>	Filing Fees	☐\$113.75 Filing Fees and Certificate of Status	☐\$113.75 Fili and Certified (		□\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
New Filing Division o Clifton Bu 2661 Exec	f Corporation			New F Division P. O. E	ING ADDRESS: ilings Section on of Corporations Box 6327 assee, FL 32314	

## 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:  Eutychus Productions, LLC
(L10-040815) V 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 15, 2010 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:
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
Eutychus Productions, 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

	Signed this 30 day of July	, 20			
	Required Signature for Florida Profit Corporation	<u>:</u>			
X	Signature of Chairman, Vice Chairman, Director, Office Incorporator: Printed Name: John Holloway  Title: President	cer, or, if Directors or Officers have not been	n selected, an		
	Required Signature of on behalf of Other Business	Entity: [See below for required signature(	s).]		
X	Signature:		_		
ī	Printed Name: Kathleen Wheeler		_		
	Signature:		_		
	Printed Name:	Title:			
	Signature:				
	Printed Name:				
	Signature:				
	Printed Name:				
	Signature:				
	Printed Name:	Title:			
	Signature:	<u> </u>			
	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.			ີ່ ທີ່	*, **,
	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)	: : :	<u> </u>	

Page 2 of 2

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

<u>ARTICLE</u>			
The principa	Il place of business/mailing address is:		
c/o John Hol	Principal street address loway	Sa	Mailing address, if different is:
1121 West P	rice Boulevard, #145	<del></del>	
North Port, I	TL 34288	_	
ARTICLE	<del></del>		
The purpose	for which the corporation is organized	is:	
	IV SHARES of shares of stock is:		
he number	of shares of stock is:	DIRECTORS	
he number	v INITIAL OFFICERS AND/OR	DIRECTORS  Name and 1	Fitle:
he number  RTICLE  Jame and T	v INITIAL OFFICERS AND/OR		Fitle:  1121 West Price Blvd., #145
The number  ARTICLE  Vame and T	of shares of stock is: 1,000  V INITIAL OFFICERS AND/OR  John Holloway, President	Name and 1	ittle:
The number ARTICLE  Vame and T	V INITIAL OFFICERS AND/OR  John Holloway, President  1121 West Price Blvd., #145  North Port, FL 34288	Name and 1	North Port, FL 34288
ARTICLE  Name and T  Address:	V INITIAL OFFICERS AND/OR  John Holloway, President  1121 West Price Blvd., #145  North Port, FL 34288	Name and T	North Port, FL 34288
The number ARTICLE  Vame and Taked decreases:	V INITIAL OFFICERS AND/OR  itle:  1121 West Price Blvd., #145  North Port, FL 34288  tle:  John Holloway, Clerk	Name and 1	North Port, FL 34288  John Holloway, Director
ARTICLE Name and T Address: Name and T Address:	V INITIAL OFFICERS AND/OR  John Holloway, President  1121 West Price Blvd., #145  North Port, FL 34288  tle:  John Holloway, Clerk  1121 West Price Blvd., #145	Name and T Address:  Name and T Address:	North Port, FL 34288  North Holloway, Director  1121 West Price Blvd., #145

	E VI REGISTERED AGENT and Florida street address (P.O. Box N	OT acceptable) of the registered agent is:
Name:	John Holloway	
Address:	1121 West Price Boulevard, #145	
	North Port, FL 34288	<del>-</del>
ARTICL		·
The <u>name</u>	and address of the Incorporator is:	
Name:	John Holloway	
Address:	1121 West Price Boulevard, #145	
	North Port, FL 34288	
this certific	Required Signature/Registered Agent is document and affirm that the facts so to the Department of State constitutes a	ervice of process for the above stated corporation at the place designated in appointment as registered agent and agree to act in this capacity  7/20/16  Date  ated herein are true. I am aware that any false information submitted in a hird degree felony as provided for in s.817.155, F.S.
	Required Signature/Incorporator	l Date

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