P 1600096842

(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:

Office Use Only



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COVER LETTER

Charter Section

2661 Executive Center Circle

Tallahassee, FL 32301

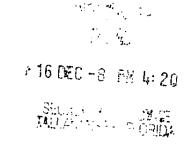
Division of Corporations

TO:

SUBJECT: MJS	Consulting .	& Stretegic	Planning, LLC. Corporation		
	Name of F	Resulting Florida Profit	Corporation		
The enclosed Certificate Entity" into a "Florida Pr			ees are submitted to convert an "(15, F.S.	Other Bus	iness
Please return all correspo	ondence concerning this	matter to:			
Mildred	Contact Person	٢			
	Contact Person				
MJS Con	Salting & St.	relegic Plann	ing, Inc		
4771 7	Bay du Blvo. Address	(#B01			
Pensacola	Florida City, State and Zip Code	32503			
MISCONSA Bahail address: (to	ting 1100 be used for future annu	live. com al report notification)			
For further information c	oncerning this matter, r	lease call:			
			21-5557		
Name of Con	ntact Person	Area Code and	21-5557 d Daytime Telephone Number		
Enclosed is a check for the	he following amount:				
	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filing Fees and Certified Copy	\$122.50 Filing Fees, Certified Copy, and Certificate of Status		
STREET ADDRESS: New Filings Section Division of Corporations Clifton Building		New I Divisi	ANG ADDRESS: Filings Section on of Corporations Box 6327		16 🖫

Tallahassee, FL 32314

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



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:

MJS Consulting & Strategic Planning, LLC. Enter Name of Other Business Entity L13000020491
Enter Name of Other Business Entity 13000020491
2. The "Other Business Entity" is a Limited Lizbility 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 Floricl2 (Enter state, or if a non-U.S. entity, the name of the country)
on February 13, 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:
MJS Consulting & Strategic Planning, Inc (Florida)
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> :
MJS Consulting & Screlegia Planning, Inc. Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: 10/09/2016 (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 <u>Sth</u> day of <u>December</u>	, 20_16		
Required Signature for Florida Profit Corporation	<u>:</u>		
Signature of Chairman, Vice Chairman, Director, Offi Incorporator: Attaca Smith Printed Name: Mildred O.SmithTitle:	icer, or, if Directors or Officers have not been s Milch C Depth Milch C C C C C C C C C C C C C C C C C C C	elected, an	
Required Signature(s) on behalf of Other Business	Entity: [See below for required signature(s).]		
Signature: Muldred OSmith			
Printed Name: Mildred O. Smith	_ Title: CEO/Chzirman		
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 Liabilit Signature of one General Partner.	y Partnership:		
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:		
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		¥57.co	<u></u>
All others: Signature of an authorized person.			8- 03J 9I
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)		8 77 4:20

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

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The name of the corporation shall be: MJS Consulting & Stretegic Planning, Inc. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Principal street address HTT Bryon Blrd HTSC Pensacola, Florida 32523 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Professional Corporation for Ang Lawful Purpose.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Principal street address Mailing address, if different is: H301 Pensocole, Floride 32503 ARTICLE III PURPOSE The purpose for which the corporation is organized is:
Principal street address H 301 Pensacola, Florida 32503 ARTICLE III PURPOSE The purpose for which the corporation is organized is:
#301 Pensocole, Floride 32503 ARTICLE III PURPOSE The purpose for which the corporation is organized is:
##301 Pensocole, Floride 32503 ARTICLE III PURPOSE The purpose for which the corporation is organized is:
Pensocole, Floride 32503 ARTICLE III PURPOSE The purpose for which the corporation is organized is:
The purpose for which the corporation is organized is:
Professional Corporation for Ang Lawful Purpose.
ARTICLE IV SHARES
The number of shares of stock is: 100.
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
Name and Title: Mildred O. Smith Name and Title: Chairman (CEO 51%)
Address: 4771 Byon BIVA #301 Address:
Penszcolz, Florida
To A WALTER WILL BE THE MILE
Name and Title: James A. Kidd III Name and Title: Vice President 44%
Address: 5414 Jash Drive Address:
Crestview, Horida 32536
Name and Title: Terz Denisc BroadwayName and Title: Secretary 5%
Address: 5414 Josh Drive Address:
Creseview, Florids 32536

ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:	
Name: Mildred O. Smith	16 DEC -8 PM 4: 20
Address: 4771 Bzyou Blvd #301	SECAL: 1 CRIDA
Penszcola Florida 32503	· · · · · · · · · · · · · · · · · · ·
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: Mildred O. Smith	
Address: 471/ Bzyou Blad #30/	
Address: HTM Bzyou Blvd #301 Penszcolz, Floridz 32503	
**************************************	*** ration at the place designated in
this certificate, I am familiar with and accept the appointment as registered agent and agree to	
	,
	12016
Required Signature/Registered Agent Date	
I submit this document and affirm that the facts stated herein are true. I am aware that any document to the Department of State constitutes a third degree felony as provided for in s.817.	
Mildred Admitte 12/08/	

Required Signature/Incorporator

Date