





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

17 JAN 13 2017  
DMS  
VL  
5

December 29, 2016

VESTA MILLARD  
1081 RIDGEWOOD LANE  
ST AUGUSTINE, FL 32086

SUBJECT: VESTAVOX CORP  
Ref. Number: W16000081459

We have received your document for VESTAVOX CORP and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Certificate of Conversion must be signed by ~~an~~ authorized person.

The document must state the number of shares of authorized ~~stock~~. The consultation of a legal counsel is always recommended if ~~uncertain~~ of the appropriate number of shares to authorize.

Please list address for president, registered agent ~~and~~ incorporator.,

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.

Tyrone Scott  
Regulatory Specialist II  
New Filings Section

→ (850)  
245-  
6805

Letter Number: 116A00025859

spoke with you at 9:22 am  
on Jan. 10, 2017.

Vm  
Vesta Millard

**COVER LETTER**

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** VestaVox Corp  
Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

Vesta Millard  
Contact Person

Vesta Vox  
Firm/Company

1081 Ridgewood Lane  
Address

St. Augustine FL 32086  
City, State and Zip Code

vestavox@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vesta Millard at (516), 383-3922  
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- \$105.00 Filing Fees     \$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  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
New Filings Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, 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:

VestaVox Corp  
Enter Name of Other Business Entity

2. The "Other Business Entity" is a S Corp  
(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 NY state  
(Enter state, or if a non-U.S. entity, the name of the country)

EIN:  
45-261  
4110

on June 20 2011  
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:

FL state

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation**:

VestaVox Corp  
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.

APPROVED  
AND  
FILED  
17 JAN 12 AM 8:47  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

*Vesta Katherine Millard*

Signed this 1<sup>st</sup> day of December, 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: *Vesta Millard*  
Printed Name: Vesta Millard Title: President (Owner/Operator)

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

Signature: *Vesta K. Millard*

Printed Name: Vesta K. Millard Title: president

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**

The name of the corporation shall be: Vesta Vox Corp

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is: (website: VestaVox.com)

Principal street address  
1081 Ridgewood Lane  
St. Augustine, FL  
32084

Mailing address, if different is:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: EIN 45-261-4110  
This corporation is my business

**ARTICLE IV SHARES**

The number of shares of stock is: ~~200~~ 200

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Vesta Millard President Name and Title: \_\_\_\_\_

Address: same as above (so below) Address: \_\_\_\_\_

~~Name and Title: Vesta Millard agent Name and Title: \_\_\_\_\_~~

~~Address: 1081 Ridgewood Ln Address: \_\_\_\_\_  
St. Aug. FL 32084~~

~~Name and Title: Vesta Millard incorporator Name and Title: \_\_\_\_\_~~

~~Address: 1081 Ridgewood Ln Address: \_\_\_\_\_  
St. Aug. FL 32084~~

APPROVED  
AND  
FILED  
17 MAR 12 AM 8:47  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

Name: Vesta Millard  
Address: 1081 Ridgewood Ln  
St. Aug, FL 32086

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Vesta Millard  
Address: 1081 Ridgewood Ln  
St. Aug, FL 32086

\*\*\*\*\*

*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*

Vesta Millard  
Required Signature/Registered Agent

12 | 1 | 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.*

Vesta Millard  
Required Signature/Incorporator

12 | 1 | 16  
Date