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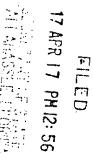
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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T. BURCH APR 1 9 2017

COVER LETTER

TO: Charter Section Division of Co					
SUBJECT: Joshua 311,	LLC				
30 5 0201	Name of	Resulting Florid	a Profit	Corporation	
	te of Conversion, Article: Profit Corporation" in ac			ees are submitted to convert an 15, F.S.	"Other Business
Please return all corres	pondence concerning this	s matter to:			
Gloria Costantino					
	Contact Person		_		
Joshua 311, LLC					
	Firm/Company		_		
6278 N Federal Hwy PM	В 230				
	Address				
Fort Lauderdale, FL 3330	08				
	City, State and Zip Code	e	_		
Gloriacost@comcast.net			_		
E-mail address: (to be used for future annu	ual report notifica	ation)		
For further information	concerning this matter,	=			
Gloria Costantino		954 _at (296-9		
Name of Co	ontact Person	Area C	ode and	l 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 Filir and Certified C		☐\$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	

Tallahassee, FL 32301

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 Con- Joshua 311, LLC	version	is:	
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.		17 A	
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) 10/08/2007	TOSE S	17 APR 17 PH 12: 56	FILED
on Enter date "Other Business Entity" was first organized, formed or incorporated		\$; 5;	
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws organized, formed or incorporated:	of whic	h it is:	now
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation	ı <u>:</u>		
Joshua 311, 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 Department of State; AND 2) must be the same as the effective date listed in the attached Article if an effective date is listed therein.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this listed as the document's effective date on the Department of State's records.	les of In	icorp	oration,

•		
Signed this day of	, 20 ¹⁷	
Required Signature for Florida Profit Corporation	o <u>n:</u>	
Signature of Chairman, Vice Chairman, Director, Of Incorporator: Printed Name: Gloria Costantino Title: Presi		ot been selected, an
Required Signature(s) on behalf of Other Busines	s Entity: [See below for required signa	ature(s).]
Signature:		
Printed Name: Gloria Costantino	Title: Managing Member	
Signature: Source Color		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		T APR
Printed Name:	Title:	
Signature:		· · · · · · · · · · · · · · · · · · ·
Printed Name:	Title:	777 4 2 1 2 2
Signature:		<u>്</u> ് ക്
Printed Name:	Title:	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative	2.	
All others: Signature of an authorized person.		
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)	

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

The name of the corporation shall be:	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address 6278 N Fedeeral Hwy PMB 230	Mailing address, if different is:
Fort Lauderdale, FL 33308	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Any and all lawfull business	
	•
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	APR 17 PM I
	- 一
	52.7
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR D	DIRECTORS
Name and Title: Gloria Costantino, President	Name and Title:
Address: 1740 NE 40 Court	Address:
Oakland Park, FL 33308	
Name and Title:	Name and Title:
Address:	Address:
Name and Title:	Name and Title:
Address:	Address:

ARTICL	<u>E VI REGISTERED A</u>	AGENT			
The name	and Florida street addres	ss (P.O. Box NOT acceptable)	of the registered agent is:		
Name:	Gloria Costantino				
Address:	6278 N Federal Hwy PMB	230			
	Fort Lauderdale, FL 33308				
ARTICL	E VII INCORPORA	<u>TOR</u>		125 T	
The name	and address of the Incorpo	orator is:		7 A))
Name:	Gloria Costantino				
Address:	1740 NE 40 Court				
	Oakland Park, FL 33334			10.40 10.40 10.40	1
******* Having be this certifi	********************* en named as registered age cate, I am familiar with and	********************** ent to accept service of proces. d accept the appointment as re	**************************************	n at the place n this capaci	e designated in ty
♥	Required Signature/Regist	stered Agent	4- F-/ Date	_	
I submit to document	his document and affirm th to the Department of State	nat the facts stated herein are constitutes a third degree felo	true. I am aware that any false ony as provided for in s.817.155, I	information F.S.	submitted in a
	Son Col		4-8-17		
	Required Signature/Incorp	porator	Da	ate	•