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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

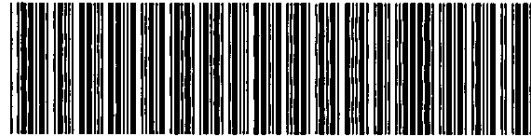
(Document Number)

Certified Copies _____

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W17-39324

CLERK OF STATE
TALLAHASSEE, FLORIDA

17 MAY 22 PM 12:42

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T. BURCH

MAY 23 2017

T. BURCH

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Urban ReLeaf Co.
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:

Janet M. McCormick
Contact Person

Urban ReLeaf Co.
Firm/Company

801 65th St. S.
Address

St. Petersburg, FL 33707
City, State and Zip Code

Urbanrco@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Janet M. McCormick at (812) 449-9065
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 8, 2017

JANET M. MCCORMICK
80165TH ST S
ST PETERSBURG, FL 33707

SUBJECT: URBAN RELEAF CO.
Ref. Number: W17000039324

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

Please complete page one of the Certificate of Conversion.

Please return 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.

Tim Burch
Regulatory Specialist III

Letter Number: 017A00009069

17 MAY 22 PM 14:33
RECEIVED
DIVISION OF CORPORATIONS
FLORIDA DEPARTMENT OF STATE

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:

Urban ReLeaf LLC

Enter Name of Other Business Entity

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

on March 6, 2014
Enter date "Other Business Entity" was first organized, formed or incorporated

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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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:

Florida

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

Urban ReLeaf Co.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: May 2, 2017
(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 2nd day of May, 2017.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Janet M. McCormick

Printed Name: Janet M. McCormick Title: President/Member

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

Signature: Janet M. McCormick

Printed Name: Janet M. McCormick Title: President/Member

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

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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: Urban ReLeaf Co.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is: (same)

801 65th St. S.

St. Petersburg, FL 33707

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The manufacture & sale of bath, beauty &
over-the-counter natural body products;
including but not limited to: creams &
lotions, salves, inhalers & dead sea salt
remedies.

ARTICLE IV SHARES

The number of shares of stock is: 100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Janet M. McCormick Name and Title: /

Address: 801 65th St. S. Address: /

St. Petersburg, FL
33707

Name and Title: / Name and Title: /

Address: / Address: /

Name and Title: / Name and Title: /

Address: / Address: /

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ARTICLE VI REGISTERED AGENT

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

Name: Janet M. McCormick
Address: 801 65th St. S.
St. Petersburg, FL 33707

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Janet M. McCormick
Address: 801 65th St. S.
St. Petersburg, FL 33707

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TALLAHASSEE, FLORIDA

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

Janet M. McCormick
Required Signature/Registered Agent

5/2/17
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.

Janet M. McCormick
Required Signature/Incorporator

5/2/17
Date