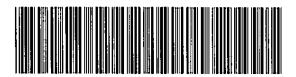
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(Requestor's Name)						
(Address)						
(Address)						
(Ćity/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



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T. BURCH JUL 18 2017

COVER LETTER

TO:	Charter Section Division of Corp						
SUBJE	ECT:	SONNY	MORRIS	ENTER	PRISES	INC.	
		Name	of Resulting	Florida Profit (Corporation	n	
		of Conversion, Arti rofit Corporation" in				mitted to convert an "Other Business	
Please	return all correspo	ondence concerning	this matter to	:			
	ROBER	T W. MOR	.215				
	,	Contact Person					
	SONNY	MORRIS EN	TERPRISE	SINC.			
		Firm/Company		harrid-manualsi-mai (17-87			
	23 <i>60</i> س	RLD PKWY (BIUD, UN	nt 42			
		Address		·			
(CLEARWATE	12,FL 337	6 3				
	(City, State and Zip C	Ode				
4	Smornis-ia	gevents-ec	e.com				
13	-mail address: (to	be used for future a	nnual report i	notification)			
For fur	ther information c	oncerning this matt	er, please call	;			
Pa	OBERT W.	MORRIS	at (7 9	57) 4	78-3	7 58	
	Name of Cor	itact Person		Area Code and	Daytime 1	Felephone Number	
Enclos	ed is a check for the	he following amoun	t:				
□ \$10	i	□\$113.75 Filing Fe and Certificate of Status		5 Filing Fees fied Copy	Certified	0 Filing Fees. Copy, and e of Status	
STREET ADDRESS: New Filings Section Division of Corporations Clifton Building				MAILING ADDRESS: New Filings Section Division of Corporations P. O. Box 6327			

Tallahassee, FL 32314

2661 Executive Center Circle

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 Co	onversion is:
SONNY MORRIS ENTERPRISES INC.	
Enter Name of Other Business Entity	_
2. The "Other Business Entity" is a CORPORATION	
(Enter entity type. Example: limited liability company, limited partnership.	FILE 17 JUL 17
general partnership, common law or business trust, etc.) first organized, formed or incorporated under the laws of	지는 글 방
on November 12, 2014 Enter date "Other Business Entity" was first organized, formed or incorporate	- 80 H - 10 H - 10 H
 If the jurisdiction of the "Other Business Entity" was changed, the state or country under the law organized, formed or incorporated: ~ ~ /A ~ 	vs of which it is now
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation	on:
SONNY MORRIS ENTERPRISES IUC.	
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 Department of State; AND 2) must be the same as the effective date listed in the attached Arti if an effective date is listed therein.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the listed as the document's effective date on the Department of State's records.	icles of Incorporation

Signed this 10 day of JULY	, 2017		
Required Signature for Florida Profit Corporation:			
Signature of Chairman Vice Chairman, Director, Office Incorporator: Printed Name: Rogens w. MozzwTitle: Dip.	er, or, if Directors or Officers have not been selected, an		
	Name: MAILIA E. KELLY Title: DIRECTOR See below for required signature(s). Title: DIRECTOR Title: DIRECTOR		
-			
Printed Name: ROBERT W. MURRIS	Title: DIRECTOR PRESIDENT		
Signature:)a /ce(leg			
Signature:			
Printed Name:	Title:		
Signature:			
Printed Name:	Title:		
Signature:			
Printed Name:	Title:		
Signature:			
Printed Name:	Title:		
If Florida General Partnership or Limited Liability Signature of one General Partner.			
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.			
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)

ARTICLE I NAME	<u></u>		
The name of the corporation shall be	SONNY N	MO RRIS	ENTERPRISES INC.
ARTICLE II PRINCIPAL C	FFICE		
The principal place of business/mail			
Principal street add	tress		Mailing address, if different is:
- trineipai sireet dae		_	
2360 WORLD PKWY BU	un 1211. T 42		
2300 31 22 1 123 7 131	, 0,0,1		
CLEARWATER, FL 33	1763	_	
ARTICLE III PURPOSE			
The purpose for which the corporat	ion is organized is:		
EVENT PLANNIN	6		
ARTICLE IV SHARES The number of shares of stock is:	100		
the number of shares of stock is.	<u> 100</u>		
ARTICLE V INITIAL OFFIC			-
Name and Title: 120BERT W. N	NOTICIS	Name an	d Title:
	s PKWY Bludioni		
Address: 2360 Work	S PRWY ISTUDION	1 Address:	
CLEARNATER	FL 33763		
Name and Title MA 1714 F VE	:11V N. 0 E 2 3 A 17	Nama an	d Title:
	•	_	
Address: 2360 worker	PKWY BLUD, UNI	Address:	
CLEARWATER	-, FL 33763		
Name and Title:		Name an	d Title:
Address:		Address:	

ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: ROBERT W. MORRIS Name: 2360 WOIZED PKWY BIND, UNIT 42 Address: CLEARWATER, FL 33763 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: ROBERT W. MORRIS Name: 2360 WORLD PICMY BLUD, UNIT 42 Address: CLEARUNTER, FL 33763 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 Required Signature/Registered Agent 7/10/17 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 \$817.155, F.S.

Required Signature/Incorporator

7/10/17