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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO:	Charter Section Division of Cor				*	
SHELL		•	C & T MAR	IINE SERVE	CES, INC.	
2019	Name of Resulting Florida Profit Corporation					
		e of Conversion, Article Profit Corporation" in ac			ces are submitted to convert and 15, F.S.	"Other Business
Please	e return all corresp	oondence concerning this	s matter to:			
TIFF	ANY GELIGA					
	· · · · · ·	Contact Person				
		Firm/Company	,			
1301	SE PALM BEACH	ROAD				
		Address		<u> </u>		
PORT	ST. LUCIE, FL 34	1952				
	•	City. State and Zip Cod	e			
flinco	rporation@gmail.co	om				
	E-mail address: (t	o be used for future annu	ual report not	ification)		
For fu	ırther information	concerning this matter,	please call:			
TIFFA	ANY GELIGA		888 at (905-7	380	
	Name of Co	ontact Person	_ \	ea Code and	l Daytime Telephone Number	
Enclo	sed is a check for	the following amount:				
= \$10	05.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 and Certifie	_	□\$122.50 Filing Fees. Certified Copy. and Certificate of Status	
New I Divisi Clifto	EET ADDRESS: Filings Section ion of Corporation in Building Executive Center			New F Divisio P. O. E	ING ADDRESS: illings Section on of Corporations Box 6327 assee, FL 32314	

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 Conversion is:
C&T MARINE SERVICES, LLC LIT - 151716
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, 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)
on07/14/2017
Enter date "Other Business Entity" was first organized, formed or incorporated
organized, formed or incorporated: N/A 4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
C & T MARINE SERVICES, INC.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: (The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.) 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.
D 1.62

Page 1 of 2

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<u>Requi</u>	red Signature for Florida Profit Corporatio	<u>n:</u>			
	ure of Chairman, Vice Chairman, Director, Off		hown calce	und a	,-
	orator: Tiffany M. Geliga I Name: THEFANY GELIGA Title: PRES		och seiec	icu, al	1
Printed	I Name: MFFANY GELIGA Title: PRES				
Requi	red Signature(s) on behalf of Other Busines:	s Entity: [See below for required signatur	re(s).]		
Signat	Tillany M. Aslisa				
Oignat	ure: Tiffany M. Geliga TIFFANY GELIGA	MGRM			
Printed	TIFFANY GELIĞA 1 Name:	Title:	_		
	ure:		_		
	1 Name:	Title:			
Signat	ure:		_		
Printe	l Name:	Title:	—		
Signat	ure:		_ _		
Printed	f Name:	Title:			
Signat	ure:				
Printed	1 Name:	Title:	_		
Signat	ure:				
Printed	1 Name:	Title:			
Signat If Floi	rida General Partnership or Limited Liabilis ure of one General Partner. rida Limited Partnership or Limited Liabilis ures of <u>ALL</u> General Partners.				
	rida Limited Liability Company: ure of a Member or Authorized Representative	,			
Signat All otl	ners: ure of an authorized person.		33.		
Signat All otl Signat				17 ;	
Signat All otl	ure of an authorized person. Certificate of Conversion:	\$35.00	7000	17 4116	
Signat All otl Signat	ure of an authorized person.	\$35.00 \$70.00 \$8.75 (Optional)	24 Contract of the Contract of	17 406 22	

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

	II PRINCIPAL OFFICE		
	Il place of business/mailing address is:		
	Principal street address	Mailing ad	dress, if different is:
1301 SE PA	LM BEACH ROAD	N/A	
PORT ST. L	UCIE. FL 34952		
The purpose	III PURPOSE of for which the corporation is organized is ALL LAWFUL BUSINESS.	::	
	IV SHARES 1000 of shares of stock is:		
The number			
The number	of shares of stock is: V INITIAL OFFICERS AND/OR	DIRECTORS	
The number	of shares of stock is: V INITIAL OFFICERS AND/OR	DIRECTORS Name and Title:	d
The number ARTICLE Name and 1	of shares of stock is: V INITIAL OFFICERS AND/OR TIFFANY GELIGA, PRES	DIRECTORS Name and Title:	7
The number ARTICLE Name and 1	of shares of stock is: V INITIAL OFFICERS AND/OR TIFFANY GELIGA, PRES 1301 SE PALM BEACH ROAD PORT ST. LUCIE, FL 34952 CHRISTOPHER ELLERT, VP	DIRECTORS Name and Title:	17 A/IG
The number ARTICLE Name and Taddress:	of shares of stock is: V INITIAL OFFICERS AND/OR TIFFANY GELIGA, PRES 1301 SE PALM BEACH ROAD PORT ST. LUCIE, FL 34952 CHRISTOPHER ELLERT, VP	DIRECTORS Name and Title: Address: Name and Title:	17 A/IG
The number ARTICLE Name and The Address: ame and The Address are	of shares of stock is: V INITIAL OFFICERS AND/OR TIFFANY GELIGA, PRES 1301 SE PALM BEACH ROAD PORT ST. LUCIE, FL 34952 CHRISTOPHER ELLERT, VP	DIRECTORS Name and Title: Address: Name and Title:	17 ANG 22 AM 9:7
The number ARTICLE Name and Taddress: ame and Taddress:	of shares of stock is: V INITIAL OFFICERS AND/OR TIFFANY GELIGA, PRES 1301 SE PALM BEACH ROAD PORT ST. LUCIE, FL 34952 CHRISTOPHER ELLERT, VP 1301 SE PALM BEACH ROAD	DIRECTORS Name and Title: Address: Name and Title: Address:	17 A/16 23 A/1

ARTICL	E VI REGISTERED AGENT		
	and Florida street address (P.O. Box NOT accepta	ble) of the registered agent is:	
Name:	TIFFANY GELIGA		
Address:	1301 SE PALM BEACH ROAD		
	PORT ST. LUCIE, FL 34952		
ARTICL			
The <u>name</u>	and address of the Incorporator is:		
Name:	TIFFANY GELIGA		
Address:	1301 SE PALM BEACH ROAD		
	PORT ST, LUCIE, FL 34952		
	een named as registered agent to accept service of pi icate, I am familiar with and accept the appointment		
Til	Lanu M. Aslica.	08/14/2017	
Tiffany M. Geliga Required Sognature/Registered Agent		Date	
	his document and affirm that the facts stated herein to the Department of State constitutes a third degre		ation submitted in a
Tu	Lany M. Geliga	08/14/2017	
d	Required Signature/Incorporator	Date	