P17000092975

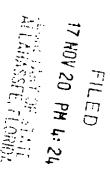
(Re	questor's Name)		
······			
(Address)			
(Ad	dress)		
(Cit	y/State/Zip/Phone	#)	
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
W7-8	58126		

Office Use Only



900305182619

11/02/17--01030--011 *+122.50



T. BURCH NOV 21 2017

Interpreting Florida Profit Corporation Angel Interpreting, Inc 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: Interpreting, Inc. Gallagher Rd. Plant City, FL 33545

City, State and Zip Code FO @ angelvri. COM

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

For further information concerning this matter, please call:

Warre of Contact Person

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

and Certified Copy

\$113.75 Filing Fees \$\square\$\$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



17

FLORIDA DEPARTMENT OF STATE Division of Corporations

November 3, 2017

GARY OR TAWNYA KELLEY 4809 GALLAGHER RD PLANT CITY, FL 33565

SUBJECT: ANGEL INTERPRETING, INC.

Ref. Number: W17000088126

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

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

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.

Have a great day'.

Tawnya

Tim Burch Regulatory Specialist III

11/14/17

Letter Number: 917A00022295

Thank you Tim. I have made the correction,

www.sunbiz.org

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 Cor	iversion	is:	
Angel Interpreting LLC 412-	- /2:	2689	•
Angel Interpreting LLC UZ- Enter Name of Other Business Entity		17	
2. The "Other Business Entity" is a	LARASSEE,	, KOA 50 BH	י - ד
first organized, formed or incorporated under the laws of Florida		₽. ₽.	}
(Enter state, or if a non-U.S. entity, the name of the country)	量主	7.	
on 09/24/2012	116	£.	
Enter date "Other Business Entity" was first organized, formed or incorporated	i		
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws organized, formed or incorporated:	s of whic	h it is no	W
Not Applicable			
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation	<u>n:</u>		
Angel Interpreting Inc. Enter Name of Florida Profit Corporation			
5. If not effective on the date of filing, enter the effective date: 0\29\20\8 (The effective date: Cannot be prior to nor more than 90 days after the date this document is Department of State.) 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.	**		

Signed this 315+ day of October	2017			
Required Signature for Florida Profit Corporation:				
Signature of Chairman, Vice Chairman, Director, Office Incorporator:	cer, or, if Directors or Officers have not been selected, an			
Required Signature(s) on behalf of Other Business Entity: See below for required signature(s).				
Signature: <u>Laurna</u> Kelley				
Signature: <u>Jannya Kelley</u> Printed Name: <u>Tannya Kelley</u>	Title: Co-Owner			
Signature:				
Printed Name:	Title:			
Signature:				
Printed Name:	Title:			
Signature:				
Printed Name:	Title:			
Signature:	 			
Printed Name:	Title:			
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: 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 The name of the corporation shall be: Angel Interpreting, Inc.			
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:			
Principal street address 11809 Gallagher Rd	Mailing address, if different is:		
Plant City, FL 33565			
ARTICLE III PURPOSE The purpose for which the corporation is organized is:			
To provide Sign Langue Language translation se	age and Foreign Spoken		
Language translation se	ervices in-person, over		
the phone, and remoteli	y via videa		
•			
ARTICLE IV SHARES			
The number of shares of stock is:			
ARTICLE V INITIAL OFFICERS AND/OR DIRECT			
, ,	ame and Title: Tawnya Kelley, Co-Chancer ddress: 4809 Gallagher Rd.		
Address: 4809 Gallaghe Rd. A Plant City, FL 335LE	Plant City, FL 33565		
Name and Title: N	ame and Title:		
Address: A	ddress:		
Name and Title:N	ame and Title:		
Address: A	address:		

ARTICLE VI. REGISTERED AGENT! The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: ____Tawnya Kelley Address: 4809 Gallagher Rd.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Tawnya Relley

Address: 4509 Gallagher Ka, Plant City, FL 33565

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 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.

Required Signature/Incorporator

7/31/11

20 PH 4: