

PI8000028813

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

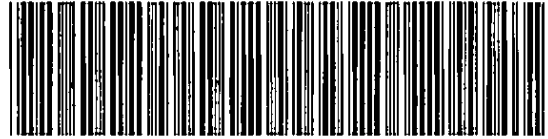
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/19/18--01034--017 **105.00

FILED
18 MAR 27 AM 11:33
MAR 27 2018

MAR 28 2018

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: IKCANROK Incorporated

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:

Timothy D. Kornacki

Contact Person

IKCANROK Enterprises, LLC

Firm/Company

450-106 STATE ROAD 13 NORTH, # 178

Address

SAINT JOHNS, FL 32259-3863

City, State and Zip Code

tdkornacki@ikcanrok.com

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

For further information concerning this matter, please call:

Timothy D. Kornacki

904

673-0011

at ()

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

<input checked="" type="checkbox"/> \$105.00 Filing Fees	<input type="checkbox"/> \$113.75 Filing Fees and Certificate of Status	<input type="checkbox"/> \$113.75 Filing Fees and Certified Copy	<input type="checkbox"/> \$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

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:

IKCANROK Enterprises, LLC

610-110298

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)

on October 22, 2010

Enter date "Other Business Entity" was first organized, formed or incorporated

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:

N/A

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

IKCANROK, Incorporated

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.

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18 MAR 27 AM 11:33
CLERK OF THE COURT
JULIA A. HARRIS
CLERK OF THE COURT
JULIA A. HARRIS

Signed this 14th day of March, 2018.

Required Signature for Florida Profit Corporation:

Signature of ~~Chairman, Vice Chairman, Director, Officer~~ or, if Directors or Officers have not been selected, an Incorporator: [Signature]

Printed Name: Timothy D. Kornacki Title: Principle

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

Signature: [Signature]

Printed Name: Timothy D. Kornacki Title: Principle/Managing Member

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:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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CLERK OF DISTRICT COURT
JULIA A. GIBSON

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: IKCANROK, Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

271 Willow Winds Pkwy

450-106, State Road 13 N, #178

Saint Johns, Florida, 32259-7267

Saint Johns, Florida 32259-3863

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Technology and Management Consulting, Program Management Contracting, Government Contracting.

ARTICLE IV SHARES

The number of shares of stock is: 10,000,000 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Timothy D. Kornacki, President

Name and Title: Linda M. Kornacki, SVP-Exec. Assistant

Address: 271 Willow Winds Pkwy

Address: 271 Willow Winds Pkwy

Saint Johns, Florida 32259-7267

Saint Johns, Florida 32259-7267

Name and Title: Dale A. Pufahl, SVP-Programs

Name and Title: Kevin C. Cromer, SVP-OPS/Contracts

Address: 10109 Redlands St. SW

Address: 1472 Trotters CV

Huntsville, Alabama 35803

Atlanta, Georgia 30338

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Timothy D. Kornacki
Address: 271 Willow Winds Pkwy
Saint Johns, Florida 32259-7267

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Timothy D. Kornacki
Address: 271 Willow Winds Pkwy
Saint Johns, Florida 32259-7267

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

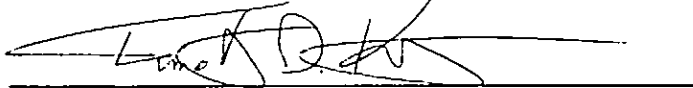


Required Signature/Registered Agent

03/14/2018

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

03/14/2018

Date

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18 MAR 27 AM 11:33
TAMPA, FLORIDA