# P14000030975

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	<del></del>	
(B	usiness Entity Name)	
(D	ocument Number)	
Control Control	Continue	Charles
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only



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#### COVER LETTER

TO: Charter Section - Division of Cor					
SUBJECT: VETERAN	VOICE INC.				
SUBJECT:	Name of	Resulting Flor	ida Profit	Corporat	ion
The enclosed Certificat Entity" into a "Florida I	e of Conversion, Articles Profit Corporation" in ac	of Incorporate ordance with	tion, and fo s. 607.11	ees are si 15, F.S.	ibmitted to convert an "Other Business
Please return all corresp	nondence concerning this	matter to:			
SHARON ELKINS					I
	Contact Person				
VETERAN VOICE INC					
	Firm/Company			1	
PO BOX 398					
	Address				
OSPREY, FLORIDA 34	229				
	City, State and Zip Code	:			
selkins@flalegals.com					
E-mail address: (t	o be used for future annu	ial report noti	fication)		
For further information	concerning this matter,	please call:			
TED ELKINS		941 at (	270-7	832	
Name of Co	ontact Person	Are	a Code and	d Daytim	e Telephone Number
Enclosed is a check for	the following amount:				
■ \$105.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	☐\$113.75 F and Certified		Certific	250 Filing Fees, d Copy, and late of Status
STREET ADDRESS:					DDRESS:
New Filings Section Division of Corporation	ne			filings Sc on of Co	ction   pporations
Clifton Building			P. O. I	Box 6327	<del>/</del>
2661 Executive Center	Circle		Tallah	assee, FI	] 32314

Tallahassee, FL 32301



## RECLIVED MINFER 22 PH 1: 08

THE STATE OF THE S

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 8, 2018

SHARON ELKINS PO BOX 398 OSPREY, FL 34229

SUBJECT: VETERAN VOICE INC Ref. Number: W18000012695

We have received your document for VETERAN VOICE INC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

The Certificate of Conversion must be signed by an authorized person.  $\nu$ 

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.

Jessica A Fason Regulatory Specialist II

Letter Number: 818A00002687

15121

www.sunbiz.org

#### COVER LETTER

TO: Charter Section Division of Co				
VETERAN	VOICE INC.			
SUBJECT:	Name of	Resulting Florida	Profit Corpora	ation
The enclosed Certificat Entity" into a "Florida l	e of Conversion, Article: Profit Corporation" in ac	s of Incorporation cordance with s.	n, and fees are 9 607.1115, F.S.	submitted to convert an "Other Business
Please return all corresp	ondence concerning this	s matter to:		
SHARON ELKINS				
	Contact Person		_	
VETERAN VOICE INC				
	Firm/Company	·	_	
PO BOX 398				
	Address		_	
OSPREY, FLORIDA 34	229			
	City. State and Zip Cod	e	_	
selkins@flalegals.com				
E-mail address: (t	o be used for future ann	ual report notifica	ation)	
For further information	concerning this matter,	please call:		1
TED ELKINS		941 at (	270-7832	
Name of Co	ontact Person	Area C	ode and Daytin	ne Telephone Number
Enclosed is a check for	the following amount:			
■ \$105.00 Filing Fees	☐\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filir and Certified C	opy Certif	2.50 Filing Fees, fied Copy, and ficate of Status
STREET ADDRESS: New Filings Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns Circle		MAILING A New Filings S Division of C P. O. Box 632 Tallahassee, E	section orporations 27

#### **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	s Certificate of Conversion is:
VETERAN VOICE LLC	
Enter Name of Other Business Entity	
2. The "Other Business Entity" is a	·
(Enter entity type. Example: limited liability company, li- general partnership, common law or business trust, etc.)	
first organized, formed or incorporated under the laws of	KO1352331
(Enter state, or if a non-U.S. entity, the name of th	e country)
10/24/2012 on	
Enter date "Other Business Entity" was first organized, for	ned or incorporated
3. If the jurisdiction of the "Other Business Entity" was changed, the state or countried or incorporated:	ntry under the laws of which it is now
4. The name of the Florida Profit Corporation as set forth in the <u>attached Article</u> VETERAN VOICE INC.	es of Incorporation:
Enter Name of Florida Profit Corporation	··································
Enter Name of Florida Front Corporation	1
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 Department of State.)  Note: If the date inserted in this block does not meet the applicable statutory filin listed as the document's effective date on the Department of State's records.	:
Page 1 of 2	

Signed thisday of	, 20_	18
Required Signature for Florida Profit Corporation:		
Signature of Chairman, Vice Chairman, Director, Offic Incorporator: SHARON ELKINS  Printed Name: SHARON ELKINS  Title: PRESID	1600	officers have not been selected, an
Required Signature(s) on behalf of Other Business F		
Signature: JAM M/s		
SHARON ELKINS Printed Name:	Title: MGRM	<u> </u>
Signature:		
Printed Name:	Title:	
Signature:	<del></del>	
Printed Name:	Title:	<u> </u>
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
If Florida General Partnership or Limited Liability Signature of one General Partner.	Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		1
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)	

Page 2 of 2

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

The name of the corporation shall be:	INC.
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
900 SE OCEAN BLVD, STE D232	PO BOX 398
STUART, FLORIDA 34994	OSPREY, FLORIDA 34229
ARTICLE III PURPOSE The purpose for which the corporation is organized is: VETERAN VOICE INC. WILL, AS VETERAN VOICE I.	
NEWSPAPER FOR ALL U.S. VETERANS WITH EMPH.	ASIS ON FLORIDA VET'S AFFAIRS AND NEWS.
	,
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR D	DIRECTORS
SHARON ELKINS PRESIDENT Name and Title:	TED ELKINS CHAIRMAN Name and Title:
900 SE OCEAN BLVD, STE D232 Address:	900 SE OCEAN BLVD, STE D232 Address:
STUART, FLORIDA 34994	STUART, FLORIDA 34994
Name and Title:	Name and Title:
Address:	Address:
Name and Title:	Name and Title:
Address:	Address:

	E VI REGISTERED AGENT		1	
The <u>name</u>	and Florida street address (P.O. Box NOT ac	ceptable) of the registered	agent is.	
Name:	TED ELKINS			
Address:	900 SE OCEAN BLVD, STE D232			
	STUART, FLORIDA 34994			
ARTICL				
The <u>name</u>	and address of the Incorporator is:			
Name:	SHARON ELKINS			
Address:	900 SE OCEAN BLVD, STE D232			
	STUART, FLORIDA 34994			
*********  Having be this certifi	**************************************	of process for the above : ment as registered agent t	stated corporation at the pind agree to act in this ca	place designated in pacity
Ī	ed Elkins	JAN	UARY 19, 2018	
<del></del>	Required Signature/Registered Agent		Date	
I submit to	his document and affirm that the facts stated he to the Department of State constitutes a third o	erein are true. I am awa legree felony as provided j	re that any false informa for in s.817.155, F.S.	tion submitted in a
	Larin Mehis	FEI	BRUARY 20, 2018	
	Required Signature/Incorporator		Date	