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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

Office Use Only



200309462872

03/01/18--01026--009 \*\*30.00

04/30/18--01034--004 \*\*75.00

FILED  
18 MAY 21 PM 1:07  
01034

M. MOON  
MAY 23 2018

**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:

Ricker Films LLC 117-81945

Enter Name of Other Business Entity

2. The "Other Business Entity" is a

LLC

(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

April 11 2017

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:

was not changed.

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

Ricker Films Inc.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date:

2/17/18

(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

**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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Signed this 23 day of April, 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: Grace Richer

Printed Name: Grace Richer Title: Owner

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

Signature: Grace Richer

Printed Name: Grace Richer Title: Authorized Representative

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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18 MAY 21 PM 1:07  
TALLAHASSEE, FLORIDA  
CLERK OF THE CIRCUIT COURT

**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: Richer Films Inc

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

653 Staffordshire Drive East  
Jacksonville, FL 32225

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Wedding videography

**ARTICLE IV SHARES**

The number of shares of stock is: 100 shares

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Grace Richer, Authorized Representative Name and Title: \_\_\_\_\_

Address: 653 Staffordshire Drive East Address: \_\_\_\_\_  
Jacksonville, FL 32225

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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**ARTICLE VI REGISTERED AGENT**

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

Name: Grace Richer

Address: 653 Staffordshire Dr. East  
Jacksonville, FL

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Grace Richer

Address: 653 Staffordshire Dr. East  
Jacksonville, FL 32225

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CLERK OF COURT  
JACKSONVILLE, FL

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*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*

Grace Richer  
Required Signature/Registered Agent

4/23/18  
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.*

Grace Richer  
Required Signature/Incorporator

4/23/18  
Date