P60000899

	. <u>.</u>	
(Red	questor's Name)	
(Add	iress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Do	cument Number)	
(Doc	zument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



200313734812

05/29/18--01034--003 **122.50

18 JUN - 4 AM 9: 05
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

JUN 0 5 2018 T SCHROEDER

COVER LETTER

TO:	Charter Section Division of Co					
SHRI	ECT: TIE ONE C	N CHARTER INC				
5 0 b 0	ECT:	Name of	Res	ulting Florida	Profit	Corporation
		te of Conversion, Article: Profit Corporation" in ac				ces are submitted to convert an "Other Business 15, F.S.
Please	return all corres	pondence concerning this	s ma	atter to:		
James	E. Branca					
	· · · · · · · · · · · · · · · · · · ·	Contact Person			•	
TIE 1	ON Charter LLC					
•	<u> </u>	Firm/Company			•	
16640	Arbor Ridge Dr					
		Address			•	
Ft My	ers, FL 33908					
		City, State and Zip Code	2		•	
jim@jl	branca.com					
F	E-mail address: (t	o be used for future annu	ial r	eport notifica	tion)	
For fu	rther information	concerning this matter,	plea	se call:		
James	E Branca		_at (239	826-8	594
-	Name of Co	ontact Person		Area Co	de and	Daytime Telephone Number
Enclos	sed is a check for	the following amount:				
5 10	5.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□S and	\$113.75 Filing d Certified Co	g Fees PPY	■\$122,50 Filing Fees, Certified Copy, and Certificate of Status
New F Division Clifton 2661 F	ET ADDRESS: Filings Section on of Corporation Building Executive Center assee, FL 32301				New F Division P. O. E	ING ADDRESS: ilings Section on of Corporations Box 6327 assee, FL 32314

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:	
TIE I ON CHARTER LLC U3-1034	
Enter Name of Other Business Entity	
2. The "Other Business Entity" is a	
(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)	
January 3, 2013	
on Enter date "Other Business Entity" was first organized, formed or incorporated	
Enter date. Other business Ettiny, 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 i organized, formed or incorporated:	t is now
Florida	
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u> TIE ONE ON CHARTER 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 Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will listed as the document's effective date on the Department of State's records.	
instead as the document's enective date on the Department of State's records.	

Signed thisday of	, 20	_•
Required Signature for Florida Profit Corporatio	<u>on:</u>	
Signature of Chairman, Vice Chairman, Director, Of Incorporator: Printed Name: Innes E Branca Title: President		
Required Signature(s) on behalf of Other Busines		-
Signature: S. Signature: Signatur		
Printed Name: Branca	Title: MGR	
Signature:		
Printed Name:	Title:	
Signature:		<u></u>
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative).	
All others: Signature of an authorized person.		18. SLUA
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	FILED JUH-4 AM 9: 05 HASSEE FLORIDA

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

The name of the corporation shall be:TIE ONE ON CHAR	TER INC
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
16640 Arbor Ridge Dr.	
Ft Myers, FL 33908	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
ANY AND ALL LAWFUL BUSINESS.	
·	
	FAS:
	SSE F
	9: C TAI ORI
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DE	RECTORS
Name and Title:	Name and Title:
Address: 16640 Arbor Ridge Dr	Address:
Ft Myers, FL 33908	
Name and Title:	Name and Title:
Address:	Address:
Name and Title:	Name and Title:
Address:	Address:

	James E Branca		
Name:	James B Branca		
Address:	16640 Arbor Ridge Dr		
	Ft Myers, FL 33908		
ARTICL			
The <u>name</u>	and address of the Incorporator is:		
Name:	James E Branca		
Address:	16640 Arbor Ridge Dr		
-	Ft Myers, FL 33908		
******* Havine be	**************************************	**************************************	nated in
	een named as registered agent to accept service of projecte, I am familiar with and accept the appointment of	**************************************	nated in
his certifi	cate, I am familiar with and accept the appointment of	is registered agent and agree to act in this capacity	nated in
his certifi			nated in
his certifi General de la companya d	Required Signature/Registered Agent	is registered agent and agree to act in this capacity \[\frac{\mathcal{Z} - \mathcal{D} - /8}{\Date} \] Date are true. I am aware that any false information submit	
this certifi	Required Signature/Registered Agent his document and affirm that the facts stated herein	is registered agent and agree to act in this capacity \[\frac{\mathcal{Z} - \mathcal{D} - /8}{\Date} \] Date are true. I am aware that any false information submit	

FILED

18 JUN-4 AM 9: 05

SECKE JARY OF STATE
FALL AHASSEE, FLORIDA