

P18000063007

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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JUL 19 2018

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: FIRO CORPORATION OF INDIANA, INC.

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:

James A. Fitzpatrick

Contact Person

FIRO Corporation

Firm/Company

5055 Groveland Ter.

Address

Naples, Florida 34119

City, State and Zip Code

jafitz@att.net

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

For further information concerning this matter, please call:

James A. Fitzpatrick

at (239)

301-8168

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 ☐ \$113.75 Filing Fees ☐ \$122.50 Filing Fees,
and Certificate of and Certified Copy Certified Copy, and
Status 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

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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:

FIRO CORPORATION OF INDIANA, INC.

F14 00004878

Enter Name of Other Business Entity

2. The "Other Business Entity" is a Corporation (operating in Florida as a Foreign Corporation)

(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 Indiana

(Enter state, or if a non-U.S. entity, the name of the country)

on July 14, 2014

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:

Florida

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

FIRO Corporation of Indiana, 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 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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CLERK OF THE COURT
JUL 19 2014

Signed this 16 day of July, 20 18.

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: James A Fitzpatrick Title: Chairman/President

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

Signature: [Signature]

Printed Name: James A. Fitzpatrick Title: Chairman/President

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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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: FIRO CORPORATION OF INDIANA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Principal street address
5055 Groveland Ter.
Naples, FL 34119

Mailing address, if different is:
12870 Trade Way Four, Suite #107-401
Bonita Springs, FL 34135

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FIRO Corporation of Indiana, Inc. is organized as a for profit corporation operating a retail produce market and
citrus gift shipping business.

ARTICLE IV SHARES

The number of shares of stock is: 160,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: James A. Fitzpatrick, Chairman
Address: 5055 Groveland Ter.
Naples, FL 34119

Name and Title: Lisa A. Fitzpatrick, Vice Chairman
Address: 5055 Groveland Ter.
Naples, FL 34119

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF NASSAU, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: James A. Fitzpatrick

Address: 5055 Groveland Ter.

Naples, FL 34119

ARTICLE VII INCORPORATOR

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

Name: James A. Fitzpatrick

Address: 5055 Groveland Ter.

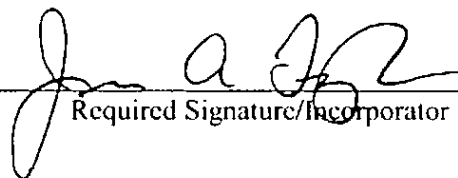
Naples, FL 34119

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

7/16/18
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.


Required Signature/Incorporator

7/16/18
Date

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