

P18000067555

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

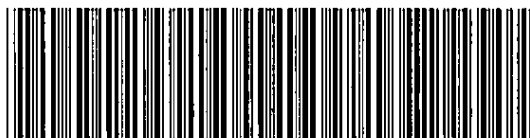
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

M. MOON

AUG 06 2018



600316356386

08/03/18--01020--017 **105.00

18 AUG -3 PM 5:26
SECURITY
TALLAHASSEE

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: South Pointe Financial, 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:

Eric A. Jacobs

Contact Person

Nexterra Law

Firm/Company

1691 Michigan Avenue Suite 360

Address

Miami Beach Florida 33139

City, State and Zip Code

ejacobs@nexterrallaw.com

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

For further information concerning this matter, please call:

Eric Jacobs

at (9542433100)

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

STREET ADDRESS:

New Filings Section
Division of Corporations
Clifton Building

MAILING ADDRESS:

New Filings Section
Division of Corporations
P. O. Box 6327

18 AUG -3 PM 5:26
TALLAHASSEE
SECTION 101

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:

South Pointe Financial, LLC

118-175663

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 7/20/18

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:

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

South Pointe Financial, Inc.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: 8/1/2018

(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.

Signed this 1 day of August, 2018.

Required Signature for Florida Profit Corporation:

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

Printed Name: Eric Jacobs Title: Incorporator

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

Signature: [Signature]

Printed Name: Eric Jacobs 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)

FILED
18 AUG - 3 PM 5:26
SECRETARY
FLORIDA

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: South Pointe Financial, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Principal street address <u>1691 Michigan Avenue Suite 360</u> <u>Miami Beach, Florida 33139</u> _____	Mailing address, if different is: _____ _____ _____
---	--

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

all lawful purposes

FILED
18 AUG -3 PM 5:26
SECRETARY
FALLS CHURCH

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Alan Rose</u> Address: <u>505 S Flagler Drive Suite 600</u> <u>West Palm Beach, Florida 33401</u> _____	Name and Title: _____ Address: _____ _____
Name and Title: _____ Address: _____ _____	Name and Title: _____ Address: _____ _____
Name and Title: _____ Address: _____ _____	Name and Title: _____ Address: _____ _____

ARTICLE VI REGISTERED AGENT

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

Name: Eric A. Jacobs
Address: 1691 Michigan Avenue Suite 360
Miami Beach, Florida 33139

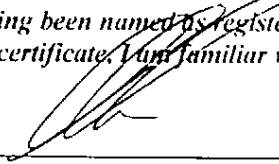
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Eric Jacobs
Address: 1691 Michigan Avenue Suite 360
Miami Beach, Florida 33139

FILED
18 AUG -3 PM 5:26
TALLAHASSEE

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

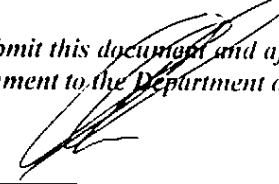


Required Signature/Registered Agent

08/01/2018

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

08/01/2018

Date