## P18000097553

(Re	equestor's Name)	
(Ad	dress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



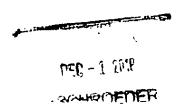
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SECRETARY OF THE PROPERTY OF THE PR



## **COVER LETTER**

TO: Charter Section Division of Corporations		•		·
SUBJECT: JJC Boats, Inc				
Nan	ne of Resulting Flo	orida Profit	Corporation	
The enclosed Certificate of Conversion, A Entity" into a "Florida Profit Corporation"				"Other Business
Please return all correspondence concernir	ng this matter to:			
James J Ciechitti				
Contact Person	n	<del></del>		
JJC Boats, Inc				
Firm/Compan	у			
2743 NE 28th Court #5				
Address		<del></del>		
Lighthouse Point, FL 33064				
City, State and Zip	Code	<del>.</del>		
jjcboats1976@comcast.net				
E-mail address: (to be used for future	annual report not	ification)		
For further information concerning this ma	atter, please call:			
James Cicchitti	at (	780-13	301	
Name of Contact Person	Ar	ea Code and	Daytime Telephone Number	
Enclosed is a check for the following amor	unt:			
□ \$105.00 Filing Fees □\$113.75 Filing and Certificate of Status			\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS: New Filings Section Division of Corporations Clifton Building 2661 Executive Center Circle		New F Divisio P. O. E	ING ADDRESS: illings Section on of Corporations Box 6327 assee, FL 32314	

Tallahassee, FL 32301

## 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:
JJC Boats, Inc
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 NJ, USA  (Enter state, or if a non-U.S. entity, the name of the country)
January 19, 1976
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:
N/A
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:  JJC Boats, 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.
Page 1 of 2
इ.स.

Signed this day of November	. 20 18	
Required Signature for Florida Profit Corporation:	·	
Signature of Chairman, Vice Chairman, Director, Offic Incorporator: James J Cicchitti Printed Name: James J Cicchitti Title: Owner/I		en selected, an
Required Signature(s) on behalf of Other Business F		s).j
Signature:		-
Printed Name: James J Cichitt	Title: 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 Signature of one General Partner.	Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	Limited Partnership:	· <del>-</del> ,
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		18 NOV 20 35 AUN 81
All others: Signature of an authorized person.		26 PH
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)	PART TO THE PART OF THE PART O

Page 2 of 2

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

RTICLE	II PRINCIPAL OFFICE				
	al place of business/mailing address is:				
	Principal street address		Mailing address, if diff	erent is:	
705 N Riv	erside Drive	274	3 NE 28th Court #5		<del></del>
ompano B	each, FL 33062	Ligi	nthouse Point, FL 33064		
RTICLE he purpos arty Boat I	se for which the corporation is organized is Fishing				<del></del>
				Z <sub>Y</sub>	
			· -	24 C	NOV 26 PH
RTICLE e number	of abases of stools in			28 88 88	7:
			•	3	
TICLE	James I Cicchitti/President		James J Cicchitti/Treasu	rer	
ne and	Title:		itle: 2743 NE 28th Court #5		
ress:	Lighthouse Point, FL 33064	Address:	Lighthouse Point, FL 330	64	· <del></del>
	James I Cinchitti/Vine Broaident		Eighthouse Folia, FE 550		
e and T	Title:	Name and T	itle:		
:881	2743 NE 28th Court #5	Address:	<del></del>		
	Lighthouse Point, FL 33064				· · · · · · ·
	Title: James J Cicchitti/Secretary		itle:		
and T	<del></del>				
	2743 NE 28th Court #5	Address:			. <u></u>

	nd Florida street address (P.C	, box NOT acceptable)	of the registered agent is:		
me: Ja	ames J Cicchitti				
iress:	743 NE 28th Court #5				
L	ighthouse Point, FL 33064				
TICLE !	VII INCORPORATOR				
name an	d address of the Incorporator	is:			
Ja ne: _	unes J Cicchitti				
iress:	743 NE 28th Court #5				
1.3	ighthouse Point, FL 33064				
*****	**************************************	**********************	************************************	**	a deviewatad in
******* ving heen	**************************************	**************************************	**************************************	** ation at the place act in this capaci	e designated in ty
******* ving been certificate	**************************************	pt the appointment as re	egistered agent and agree to a	** ation at the place act in this capaci	e designated in ty
******* ving been certificate R	e fam fumiliar with and acce	pt the appointment as re Agent facts stated herein are	29 istered agent and agree to a 11/5/2018  Date  True. I am aware that any fa	act in this capaci	ty

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