(Requestor's Name)	
(Address)	
	900322455669
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	¥122.50×
(Business Entity Name)	01/02/19 01035005
(Document Number)	
ied Copies Certificates of Status	
cial Instructions to Filing Officer:	
· · · · · · · · · · · · · · · · · · ·	PH 3: 07



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 8, 2019

JAMES COOK 1900 N BAYSHORE DR, STE 5004 MIAMI, FL 33132

SUBJECT: YALE REALTY ADVISORS, INC Ref. Number: W1900002002

We have received your document for YALE REALTY ADVISORS, INC and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Keyna E Page Regulatory Specialist II

Letter Number: 819A00000547

2019 J 11 15 F. . . .

www.sunbiz.org

Division of Cornerations PO BOY 6397 Tallahasson Florida 39314

COVER LETTER

TO: Charter Section Division of Corporations

SUBJECT: Yale Realty Advisors, 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 Cook

,

Contact Person

Yale Realty & Capital Advisors

Firm/Company

1900 N Bayshore Dr, Suite 5004

Address

Miami, FL 33132

City, State and Zip Code

james@yaleadvisors.com

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

For further information concerning this matter, please call:

James Cook

Name of Contact Person

at (_______) Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

3 \$105.00 Filing Fees	1 \$113.75 Filing Fees	D\$113.75 Filing Fees	\$122.50 Filing Fees,
	and Certificate of	and Certified Copy	Certified Copy, and
	Status		Certificate of Status

TREET ADDRESS:

Jew Filings Section Division of Corporations Llifton Building 661 Executive Center Circle allahassee, FL 32301

MAILING ADDRESS:

New Filings Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 <u>Certificate of Conversion</u> For <u>"Other Business Entity"</u> 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:

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

Yale Realty Advisors, 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.)

<u>Note:</u> 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

JAN 15 PH 3: 08

~	28th	•		December	٢
Signed this	•		day of		

20<u>18</u>

Required Signature for Florida Profit Corporation:

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

Signature: <u>Charlie Sparks</u>	
Charlie Sparks Printed Name:	Title:
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 <u>ALL</u> 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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Page 2 of 2

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

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•

, .

he name of the corporation shall be:_____

PRINCIPAL OFFICE RTICLE II

he principal place of business/mailing address is:

Principal street address

26 SW Commerce Drive

lite 130

Suite 5004

ike City, FL 32025

Miami, FL 33132

1900 N Bayshore Drive

Mailing address, if different is:

RTICLE III PURPOSE

e purpose for which the corporation is organized is:

iy and all lawful business

ICLE IV SHARES 100

number of shares of stock is:

umber of	snares of stock is:				
<u>ICLE V</u>	INITIAL OFFICERS AND/OR D	IRECTORS		19 J	
: and Title	Charlie Sparks, President	Name and Title:		I NUL	
ess:	426 SW Commerce Drive, Suite 130	Address:		-0- P	
	Lake City, FL 32025			ي: بن	
and Title	Charlie Sparks, Treasurer	Name and Title:	2 m	90	1 i 14
ss:	426 SW Commerce Drive, Suite 130	Address:			•
	Lake City. FL 32025				-
and Title	Charlie Sparks, Secretary	Name and Title:			_
s:	426 SW Commerce Drive, Suite 130	Address:			_
	Lake City. FL 32025				-
					-

RTICLE VI REGISTERED AGENT

۰.

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

ame:	James Cook	
.ddress:	1900 N Bayshore Dr, Suite 5004	
	Miami, FL 33132	

RTICLE VII INCORPORATOR

he name and address of the Incorporator is:

James Cook ame: 1900 N Bayshore Dr. Suite 5004 ddress: Miami, FL 33132

wing been named as registered agent to accept service of process for the above stated corporation at the place designated in s certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

James Cook Required Signature/Registered Agent

bmit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a ument to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

James Cook Required Signature/Incorporator

12/28/18

12/28/18

Date

Date

