## P1900010102

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
`	•	
(Cit	ry/State/Zip/Phone	<del>= #)</del>
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

200323214482

01/29/19--81025--006 \*\*113.75

ZOIS JAN 29 AM 8: 41
SECRETARY OF STATE

FEB 0 5 2019

## **COVER LETTER**

Division of Co				
SUBJECT: OWEN BR	COTHERS CORPORATION	N'		
SUBJECT	Name of	Resulting Florida Profit	Corporation	
		es of Incorporation, and for coordance with s. 607.11	ees are submitted to convert an "Other Busi 15, F.S.	ness
Please return all corres	spondence concerning thi	s matter to:		
Melanie Contreras				
<del></del> -	Contact Person			
MyUSAcorporation.com	n			
	Firm 'Company			
1 Radisson Plaza, Ste. 80	00			
	Address			
New Rochelle, NY 1080	ıl			
	City, State and Zip Cod	e		
billyeytell@comcast.net				
E-mail address: (	to be used for future ann	ual report notification)		
For further information	concerning this matter,	please call:		
Melanie Contreras		at ( 877 ) 330-20	677	
Name of C	ontact 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 Corporatio Clifton Building		New F Divisio	ING ADDRESS: illings Section on of Corporations	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, 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 COWEN BROTHERS CORPORAT ON	Conversio	n is:	
Enter Name of Other Business Entity	—·		
2. The "Other Business Entity" is a			
(Enter entity type. Example: limited liability company, limited partnershi general partnership, common law or business trust, etc.)	p.		
first organized, formed or incorporated under the laws of [Illinois]  (Enter state, or if a non-U.S. entity, the name of the country)	-		
06/23/1997 on			
Enter date "Other Bu liness Entity" was first organized, formed or incorpora	.· ted		
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the la organized, formed or incorporated:	ws of wh	ich it is	s now
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporat</u> OWEN BROTHERS CORPORATION	ion:		
Enter Name of Florida Profit Corporation	. <del>-</del>		
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 Department of State.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, listed as the document's effective date on the Department of State's records.			
Page 1 of 2	SECKETARY O TALLAHASSEE,	2019 JAN 29	71 
	)F ST	AM 8	

•	10
Signed thisday of	, 20
Required Signature for Florida Profit Corporation:	in a landadoria
Signature of Chairman, Vice Chairman, Director, Officer	, or, if Directors or Officers have not been selected, an
Incorporator: Roy OWEN Title: President	
Printed Name: ROY OWEN 11tle: President	
Required Signature(s) on behalf of Other Business En	ntity: [See below for required signature(s).]
Nonanne Monte de la	
Printed Name:	_ Title:
Signature: Rojanne M. Owen	
ROXANNE OWEN Printed Name:	Title:
Printed Name.	
Signature: Lypna M. Extel	
Printed Name: SUZANNE EYTEL U	Title:
Signature:	
Printed Name:	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	
If Florida General Partnership or Limited Liability Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	
All others: Signature of an authorized person.	
Fees:	\$35.00
Certificate of Conversion: Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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

ARTICLE II			
The principal p	place of business/mailing address is:		
	Principal street address		Mailing address, if different is:
1027 NORWA	LK ROAD		
LEMONT, IL (	50439		
ARTICLE II The purpose for All lawful busi	or which the corporation is organized is:		
	·		
		<del></del>	
		c	
The number of	shares of stock is:		
he number of	shares of stock is:  INITIAL OFFICERS AND/OR DIF	RECTORS	ROY OWEN - Vice President
The number of ARTICLE V	shares of stock is:  INITIAL OFFICERS AND/OR DIF	RECTORS  Name and Title	ROY OWEN - Vice President 2871 N OCEAN BLVD., SUITE C311
The number of ARTICLE V	shares of stock is:  INITIAL OFFICERS AND/OR DIF  ROY OWEN - President  e:	RECTORS	·
The number of ARTICLE V Name and Titl Address:	shares of stock is:  INITIAL OFFICERS AND/OR DIF  ROY OWEN - President  2871 N OCEAN BLVD., SUITE C311  BOCA RATON, FL 33431	RECTORS  Name and Title  Address:	2871 N OCEAN BLVD., SUITE C311 BOCA RATON, FL 33431
The number of ARTICLE V Name and Titl Address:	shares of stock is:  INITIAL OFFICERS AND/OR DIF  ROY OWEN - President  2871 N OCEAN BLVD., SUITE C311  BOCA RATON, FL 33431	RECTORS  Name and Title	2871 N OCEAN BLVD., SUITE C311 BOCA RATON, FL 33431
The number of ARTICLE V Name and Titl Address:	shares of stock is:  INITIAL OFFICERS AND/OR DIF  ROY OWEN - President  2871 N OCEAN BLVD., SUITE C311  BOCA RATON, FL 33431  ROXANNE OWEN - Secretary  e:	Name and Title Address:  Name and Title	2871 N OCEAN BLVD., SUITE C311 BOCA RATON, FL 33431 SUZANNE EYTEL - Treasurer
ARTICLE V Name and Titl Address: Name and Titl Address:	shares of stock is:  INITIAL OFFICERS AND/OR DIF  E. ROY OWEN - President  2871 N OCEAN BLVD., SUITE C311  BOCA RATON, FL 33431  E. ROXANNE OWEN - Secretary  2895 CITRUS LAKE DR., SUITE O-206	Name and Title Address:  Name and Title Address:	2871 N OCEAN BLVD., SUITE C311 BOCA RATON, FL 33431 SUZANNE EYTEL - Treasurer 4498 CRIMSON AVE.

ARTICIA The name	E VI REGISTERED AGENT and Florida street address (P.O. Box NOT acceptab	de) of the registered agent is:	
Name:	WILLIAM EYTEL		
Address:	4498 CRIMSON AVE.		
Addiess.	NAPLES, FL 34119		
ARTICL The name	E VII INCORPORATOR  and address of the Incorporator is:		
Name:	ROY OWEN		
Address:	2871 N OCEAN BLVD., SUITEC311		
Addios.	BOCA RATON, FL 33431		
	teen named as registered agent to accept service of placete, I am familiar with and accept the appointment	pares for the above stated corporation in the place acres.	ated in
	Required Signature/Registered Agent	Date	
l submit docume		n are true. I am aware that any false information submit e felony as provided for in s.817.155, F.S.	ted in a
: SD	7 Km . TI	01/14/2019	
<u>}\</u>	Required Signature/Incorporator	Date	