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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

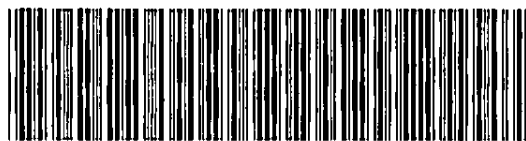
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FEB 19 2019



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19 FEB 19 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W19-5737



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 16, 2019

LORRIE REID
310 ALMOND ST #101
CLERMONT, FL 34711-3116

SUBJECT: BUSINESS RESOURCE PARTNERS INC
Ref. Number: W19000005737

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19 FEB 19 AM 10:18
SECRETARY OF STATE
TALLAHASSEE

We have received your document for BUSINESS RESOURCE PARTNERS INC and your check(s) totaling \$105.00. 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.

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

☐ 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.

☐ Matthew T Moon
Regulatory Specialist III

Letter Number: 419A00001272

Signed
OK
(pg 3 attached or 2012)

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Business Resource Partners, 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:

Lorrie Reid

Contact Person

Business Resource Partners

Firm/Company

310 Almond Street #101

Address

Clermont, Florida, 34711-3116

City, State and Zip Code

Lorrie@Business-Resource-Partner.com

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

For further information concerning this matter, please call:

Lorrie Reid at (321) 236-2771

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
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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SECRET
TALLAMOUNT

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation

214000054529

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:

Business Resource Partners, LLC

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 April 3, 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:

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

Business Resource Partners Inc

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: JAN 11, 2014

(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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TALLAHASSEE

Signed this 25th day of October, 2018.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Business Resource Partner LLC

Printed Name: Lorrie L Reid Title: CEO

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

Signature: 

Printed Name: Lorrie Reid Title: Founder/CEO

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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TALLAHASSEE

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: Business Resource Part Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

310 Almond Street #101

Clermont, Florida 34711-3116

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Business Services: including but not limited to:

Bookkeeping, Accounting, Income Tax Preparation, Payroll & Payroll Taxes, Information Technology Services,

Virtual Administrative Services, Mailbox, Answering Services and Human Resources.

ARTICLE IV SHARES

The number of shares of stock is: 3000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lorrie Reid - CEO

Address: 310 Almond Street

Clermont, Florida 34711

Name and Title: Liam Quin Reid

Address: 159 Ronnie Drive

Altamonte Springs, Florida 32714

Name and Title:

Address:

Name and Title: Mason Reid - COO

Address: 12530 San Juan Road

Groveland, Florida 34736

Name and Title: Danny Reid

Address: 310 Almond Street

Clermont, Florida 34711

Name and Title:

Address:

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ARTICLE VI REGISTERED AGENT

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

Name: Lorrie L Reid
Address: 310 Almond Street
Clermont, Florida 34711

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Business Resource Partners, LLC
Address: 310 Almond Street
Clermont, Florida 34711

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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

10/25/2018
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

10/25/2018
Date