

P1900000116266

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

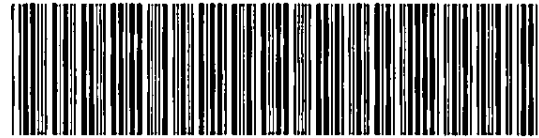
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/19/19--01032--025 **105.00

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19 FEB 19 PM 1:11

FBI



121
SCHROEDER

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: JC & M ADVANTAGE INVESTMENT 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:

Juan C Valdes

Contact Person

JC & M ADVANTAGE INVESTMENT LLC

Firm/Company

1732 S CONGRESS AVE, STE #141

Address

PALM SPRINGS, FL 33461

City, State and Zip Code

jcawnings@yahoo.com

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

For further information concerning this matter, please call:

Juan C Valdes

Name of Contact Person

at (561) 667-3790

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

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:

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 07/17/2018
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:

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.

FILED
19 FEB 19 PM 12:30
ST. LOUIS, MO.
-111-

Signed this 08 day of February, 2019.

Required Signature for Florida Profit Corporation:

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

Incorporator: Juan C Valdes

Printed Name: Juan C Valdes Title: P

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

Signature: X Juan C Valdes

Printed Name: Juan C Valdes Title: MGR

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.

f Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

If others:

Signature of an authorized person.

ES:

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
19 FEB 19 09:12:00
STATE OF FLORIDA
CLERK OF THE COURT

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: JC & M ADVANTAGE INVESTMENT INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Principal street address

Mailing address, if different is:

1732 S Congress Ave, Ste#141

1732 S Congress Ave, Ste# 141

Palm Springs, FL 33461

Palm Springs, FL 33461

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and All Lawful Business Activities.

TICLE IV SHARES

number of shares of stock is: 1000

FILED
19 FEB 19 PM 12:00
SECRETARY OF STATE
FLORIDA

TICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Juan C Alvares President

Name and Title: _____

Address: 1732 S Congress Ave, Ste# 141

Address: _____

Palm Springs, FL 33461

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Title: _____

Name and Title: _____

Address: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Juan C Valdes

Address: 1732 S Congress Ave, Ste# 141

Palm Springs, FL 33461

ARTICLE VII INCORPORATOR

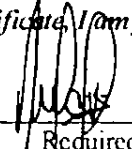
The name and address of the Incorporator is:

Name: Juan C Valdes

Address: 1732 S Congress Ave, Ste# 141

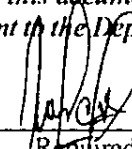
Palm Springs, FL 33461

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

02/08/2019
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

02/08/2019
Date

FILED
19 FEB 19 PM 1:00
STATE OF FLORIDA
DEPARTMENT OF STATE