## P190000030314

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| /5                                      |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
|   |
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## **COVER LETTER**

TO: Charter Section

Tallahassee, FL 32301

| Division of  | Corporations  |                                |                              |  |
|--|---|--------------------------------|------------------------------|--|
| SUBJECT:   | OHN PATRICK GISRIEL, P.,                                      | Α.                             |                              |  |
| 30B3ECT  | Name of   | Resulting Flori                | da Profit (                  | Corporation  |
| The enclosed Certifi<br>Entity" into a "Flori-   | cate of Conversion. Articles<br>da Profit Corporation'' in ac | of Incorporati                 | on, and fe<br>s. 607.111     | ees are submitted to convert an "Other Business 15, F,S.                 |
| Please return all con  | respondence concerning this                                   | matter to:                     |                              |  |
| JOHN P. GISR   | HEL.  |                                |                              |  |
|  | Contact Person  |                                |                              |  |
| JOHN PATRIC  | K GISRIEL, P.A.   |                                |                              |  |
|  | Firm/Company  |                                | <del>.    </del>             |  |
| 155 GALICIA V  | WAY UNIT 101  |                                |                              |  |
|  | Address   |                                | _ <del>_</del>               |  |
| JUPITER, FL 3  | 33458   |                                |                              |  |
| <del></del>  | City, State and Zip Code                                      | 2                              |                              |  |
| JOHN@PALM  | BEACHES.NET   |                                |                              |  |
| E-mail address   | s: (to be used for future annu                                | ual report notifi              | cation)                      |  |
| For further informat   | ion concerning this matter,                                   | please call:                   |                              |  |
| JOHN P. GISR   | IEL   | _at (                          | 234-0                        | 746  |
| Name o   | f Contact Person  | Area                           | Code and                     | Daytime Telephone Number   |
| Enclosed is a check  | for the following amount:                                     |                                |                              |  |
| ■ \$105.00 Filing Fo   | ees  \$113.75 Filing Fees and Certificate of Status           | □\$113.75 Fil<br>and Certified |                              | ☐\$122.50 Filing Fees. Certified Copy, and Certificate of Status         |
| STREET ADDREST New Filings Section Division of Corpora Clifton Building 2661 Executive Cer | n<br>itions   |                                | New F<br>Division<br>P. O. E | ING ADDRESS: illings Section on of Corporations Box 6327 assee, FL 32314 |

## Certificate of Conversion For "Other Business Entity" Into 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:   |
|--|
| SE OCEAN DAY LLC   |
| Enter Name of Other Business Entity  |
| 2. The "Other Business Entity" is a LLC   \( \)\( \)\( \)\( \)\( \)\( \)\( \)\(  |
| 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 DECEMBER 24, 2018   |
| 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 page of the Floride Profit Corporation as set forth in the attached Articles of Incorporation:  |
| 4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>   |
| JOHN PATRICK GISRIEL, P.A.   |
| 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

| Signed                    | this 21 st day of FEBRUARY  |  |               |              |  |
|---------------------------|---|--|---------------|--------------|--|
|                           | ed Signature for Florida Profit Corporation:  |  |               |              |  |
| Incorpo                   | re of Chairman, Vice Chairman, Director, Officerator:  Name: JOHN P. GISRIEL Title: PRESID                    |  | n selected.   | an           |  |
| Requir                    | ed Signature(s) on behalf of Other Business I   | Entity:  See below for required signature(s                  | 0.]           |              |  |
| Signatu                   | JOHN W. BOYER   |  |               |              |  |
| Printed                   | Name: JOHN W. BOYER   | Title:   |               |              |  |
| Signatu                   | ire:  |  |               |              |  |
| Printed                   | Name:   | Title:   |               |              |  |
| Signatu                   | are:  |  |               |              |  |
| Printed                   | Name:   | Title:   |               |              |  |
| Signatu                   | ire:  |  |               |              |  |
| Printed                   | Name:   | Title:   |               |              |  |
| Signatı                   | ire:  |  |               |              |  |
| Printed                   | Name:   | Title:   |               |              |  |
| Signatı                   | ire:  |  |               |              |  |
| Printed                   | Name:   | Title:   |               |              |  |
|                           | ida General Partnership or Limited Liability are of one General Partner.                                      | Partnership:   |               |              |  |
| <b>If Flor</b><br>Signatu | ida Limited Partnership or Limited Liability ires of ALL General Partners.                                    | Limited Partnership:   |               |              |  |
|                           | ida Limited Liability Company: ure of a Member or Authorized Representative.                                  |  | the C         |              | :  |
| <b>All oth</b><br>Signati | ers:<br>are of an authorized person.  |  |               | 19 HAR -     |  |
| Fees:                     | Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status: | \$35.00<br>\$70.00<br>\$8.75 (Optional)<br>\$8.75 (Optional) | SKEEL FLOAIDA | -4 PK I2: 23 | 10 10 10 10 10 10 10 10 10 10 10 10 10 1 |

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

| ARTICLE I        | <u>NAME</u>                                   | JOHN PATRICK GISRIEL, P.A.     |                        |
|------------------|---|--------------------------------|------------------------|
| The name of the  | e corporation shall be:                       |                                |                        |
| ARTICLE II       | PRINCIPAL OFFICE                              |                                |                        |
| The principal pl | lace of business/mailing address is:          |                                |                        |
|                  | Principal street address                      | Mailing add                    | ress, if different is: |
| 155 GALICIA V    | VAY UNIT 101                                  | _                              |                        |
| JUPITER, FL 3    | 3458  |                                |                        |
|                  | PURPOSE or which the corporation is organized | is:                            |                        |
| THE PURPOSE      | E FOR WHICH THE CORPORATION IS                | S ORGANIZED ARE TO ENGAGE IN   | REAL ESTATE SALES      |
| ACTIVITIES P     | ERMITTED UNDER THE LAWS OF T                  | HE U.S. AND THE REAL ESTATE LA | AWS UNDER CHAPTER 475  |
| OF THE STATE     | E OF FLORIDA.                                 |                                |                        |
|                  |   |                                |                        |
|                  |   |                                |                        |
|                  |   |                                |                        |
|                  | · · · · · · · · · · · · · · · · · · ·         |                                |                        |
|                  |   |                                |                        |
|                  |   |                                |                        |
| ARTICLE IV       |   |                                |                        |
| The number of    | shares of stock is:                           |                                | <u> </u>               |
| ARTICLE V        | INITIAL OFFICERS AND/OR                       | DIRECTORS                      | 19 MAR                 |
| Name and Title   | IOHN P. GISRIFI PRESIDENT                     | Name and Title:                | 200 A                  |
| Address:         | 155 GALICIA WAY UNIT 101                      | Address:                       | <u> </u>               |
|                  | JUPITER, FL 33458                             | <del></del>                    | 2. 2.                  |
| Name and Title   | e:  | Name and Title:                |                        |
| Address:         |   | Address:                       |                        |
| Name and Title   | e:  |                                |                        |
|                  | ·   |                                |                        |
| Address:         |   | Address:                       |                        |
|                  |   |                                |                        |

|                                       | E VI REGISTERED AGENT  and Florida street address (P.O. Box NOT accep                                     | able) of the registered agent is:   |    |
|---------------------------------------|---|---|----|
| Name:                                 | JOHN P. GISRIEL   | , -   |    |
| Address:                              | 155 GALICIA WAY UNIT 101  |   |    |
| , 104, 100                            | JUPITER, FL 33458   |   |    |
| <u>ARTICL</u>                         | E VII INCORPORATOR  |   |    |
| The name                              | and address of the Incorporator is:   |   |    |
| Name:                                 | JOHN P. GISRIEL   |   |    |
| Address:                              | 155 GALICIA WAY UNIT 101  |   |    |
|                                       | JUPITER, FL 33458   |   |    |
| ********<br>Having be<br>this certifi | **************************************  | **************************************  | 'n |
|                                       | 7-3-  | 2/21/2019   |    |
|                                       | Required Signature/Registered Agent   | Date  |    |
| I submit to<br>document               | his document and affirm that the facts stated here<br>to the Department of State constitutes a third degr | n are true. I am aware that any false information submitted in<br>the felony as provided for in s.817.155, F.S. | a  |
|                                       | 7-50  | 3/21/2-19<br>Data   |    |
|                                       | Required Signature/Incorporator   | Date  |    |