

P19000027652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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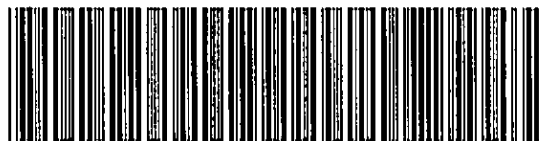
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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MAR 25 2019

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SECRETARY  
DIVISION OF  
10 10 10 10 10 10

## COVER LETTER

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** Drew Osceola Photography, 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:

Steve A. McKown, CPA

\_\_\_\_\_  
Contact Person

Joseph D. Miller, Jr. & Company, PA, Certified Public Accountant

\_\_\_\_\_  
Firm/Company

443 East Pasadena Avenue

\_\_\_\_\_  
Address

Clewiston, FL 33440

\_\_\_\_\_  
City, State and Zip Code

steve@josephmillercpa.com

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

For further information concerning this matter, please call:

Steve McKown

at ( 863 ) 599-0868

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> \$105.00 Filing Fees | <input type="checkbox"/> \$113.75 Filing Fees<br>and Certificate of<br>Status | <input type="checkbox"/> \$113.75 Filing Fees<br>and Certified Copy | <input checked="" type="checkbox"/> \$122.50 Filing Fees.<br>Certified Copy, and<br>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

**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:

Drew Osceola Photography, LLC

Enter Name of Other Business Entity

2. The "Other Business Entity" is a limited liability company L17 000250512  
(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 12/07/2017  
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:

N/A

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

Drew Osceola Photography, Inc.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: 03/21/2019

(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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DEPT. OF STATE  
2019 MAR 21 PM 3:05  
TALLAHASSEE, FLORIDA

Signed this 21st day of March, 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: Drew Osceola

Printed Name: Drew Osceola Title: President/Incorporator

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

Signature: Drew Osceola

Printed Name: Drew Osceola Title: Sole Member

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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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
19 MAR 25 PM 2:35

**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: Drew Osceola Photography, Inc.

**ARTICLE II      PRINCIPAL OFFICE**

The principal place of business/mailing address is:

Principal street address

5119 Madison Lakes Circle East

Davie, FL 33328

Mailing address, if different is:

same

**ARTICLE III      PURPOSE**

The purpose for which the corporation is organized is:

Any and all legal purposes.

19 MAR 25 PM 2:35

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DIVISION OF CORPORATIONS

**ARTICLE IV      SHARES**

The number of shares of stock is: 100

**ARTICLE V      INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Drew Osceola, President

Address: 5119 Madison Lakes Circle East

Davie, FL 33328

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: Steven Carlson, Secretary

Address: 5119 Madison Lakes Circle East

Davie, FL 33328

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Joseph D. Miller, Jr. & Company, PA. Certif  
Address: 443 East Pasadena Avenue  
Clewiston, FL 33440

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Drew Osceola  
Address: 5119 Madison Lakes Circle East  
Davie, FL 33328

\*\*\*\*\*

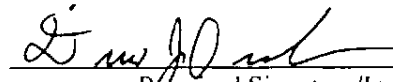
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

 CPA for  
Required Signature/Registered Agent

03/21/2019  
Date

Joseph D. Miller, Jr & Company, PA

*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

03/21/2019  
Date