P19000037881

(Re	equestor's Name)	
(Ad	idress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	; #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
Special Instructions to	Filing Officer:	





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03/11/19--01010--003 **105.00



J. FASON MAY 08 2019

COVER LETTER .

TO: Charter Section

Division of Co.	rporations			•
SUBJECT: Howling Be	tty Incorporated			
		Resulting Florida	Profit	Corporation
The enclosed Certificat Entity" into a "Florida	e of Conversion, Article Profit Corporation" in ac	s of Incorporation cordance with s.	n, and fe 607.11	ees are submitted to convert an "Other Business 15, F.S.
Please return all corresp	pondence concerning this	s matter to:		
Ruth Carmody				
	Contact Person		-	
Tidwater Accounting Boo	okkeeping Services Inc.			
	Firm/Company		-	
609 Independence Parkwa	ay Ste. 120			
	Address	<u> </u>	_	
Chesapeake, VA 23320-5	209			
	City, State and Zip Code	2	-	
sfalcone@tabtax.com				
E-mail address: (t	o be used for future annu	al report notifica	tion)	
For further information	concerning this matter,	please call:		
Ruth Carmody		_at (43635	0
Name of Co	ontact Person	Area C	ode 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 and Certified Co		☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: New Filings Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301			New Fi Division P. O. B	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 <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 Conve	rsion is:
Howling Betty 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	
(Enter state, or if a non-U.S. entity, the name of the country)	
April 12, 2018 on	
Enter date "Other Business Entity" was first organized, formed or incorporated	
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:	
Howling Betty Incorporated	
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 file Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this clisted as the document's effective date on the Department of State's records.	
اب	2019

Page 1 of 2

2019 HAY -8 AN 8: 32 SECREPARY OF STATE

Signed this 22nd day of February	. 20 19	
Required Signature for Florida Profit Corporation		
Signature of Chairman, Vice Chairman, Director, Offi Incorporator: Odam Smuth Printed Name: Adam Smuth Title: Of	cer or if Directors or Officers have not bee	n selected, an
Required Signature(s) on behalf of Other Business	Entity: [See below for required signature(s	3).]
Printed Name: Adam Smith	Title: Member	
Signature:		
Printed Name:		
Signature:		
Printed Name:		
Signature:		
Printed Name:		
Signature:		
Printed Name:		
Signature:		
Printed Name:		
If Florida General Partnership or Limited Liability Signature of one General Partner.	Partnership:	
<u>If Florida Limited Partnership or Limited Liability</u> Signatures of <u>ALL</u> General Partners.	Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		
All others: Signature of an authorized person.		
Fees: Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	

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

ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is
70 Redondo Drive	
atellite Beach, FL 32937	
The purpose for which the corporation is organized by lawful business purpose.	red is:
 	
· · · · · · · · · · · · · · · · · · ·	
ARTICLE V INITIAL OFFICERS AND/	
The number of shares of stock is:	
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/O Name and Title: Adam Smith, President	OR DIRECTORS Name and Title:
The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/O Name and Title: Adam Smith, President 170 Redondo Drive	OR DIRECTORS Name and Title:
ARTICLE V INITIAL OFFICERS AND/ON Name and Title: Address: 170 Redondo Drive	OR DIRECTORS Name and Title: Address:
The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/O Name and Title: Adam Smith, President 170 Redondo Drive Satellite Beach, FL 32937 Name and Title:	OR DIRECTORS Name and Title: Address: Name and Title:
Name and Title: Satellite Beach, FL 32937	Name and Title: Address: Name and Title: Address:
Adam Smith, President Address: Satellite Beach, FL 32937 Name and Title: Address:	Name and Title: Address: Name and Title: Address: Address:

ARTICL	E VI REGISTERED AGENT	
The name	e and Florida street address (P.O. Box NOT a	eceptable) of the registered agent is:
Name:	Ruth Smith	
Address:	170 Redondo Drive	
	Satellite Beach, FL 32937	
ARTICL	E VII INCORPORATOR	
The name	and address of the Incorporator is:	
Name:	Adam Smith	
Address:	170 Redondo Drive	
	Satellite Beach, FL 32937	
*****	*******	*******
		e of process for the above stated corporation at the place designated i tment as registered agent and agree to act in this capacity
Rid	thSinath	2-22-19
	Required Signature/Registered Agent	Date
Lenhmit	this document and affirm that the facts stated	nerein are true. I am aware that any false information submitted in
		degree felony as provided for in s.817.155, F.S.
ad	an Smith	2-22-19 Date
	Required Signature/Incorporator	Date