

P19000046215

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

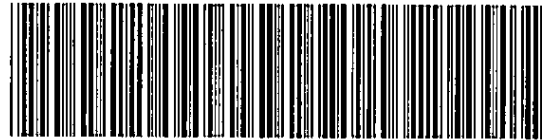
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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2019 MAY 24 AM 10:26
SECRETARY OF STATE
PALM BEACH, FLORIDA

FILED

JUN 06 2019

K. Brumbley

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: SpeechRep Media, 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:

James Morrison Peake

Contact Person

SpeechRep Media, Inc

Firm/Company

3624 S. Lockwood Ridge Road

Address

Sarasota, FL 34239

City, State and Zip Code

jpeake@speechrep.com

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

For further information concerning this matter, please call:

James Morrison Peake

at (781) 405-5815

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

*I own 100% of company
SPEECHREP MEDIA, INC.*

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:

SpeechRep Media, Inc.

Enter Name of Other Business Entity

2. The "Other Business Entity" is a Sub S Corp
(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 Commonwealth of Massachusetts
(Enter state, or if a non-U.S. entity, the name of the country)

on 10-04-2010

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:

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

SpeechRep Media, Inc

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: MAY 22 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.

Signed this MAY day of 22, 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: James Morrison Peake

Printed Name: James Morrison Peake Title: President

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

Signature: _____

Printed Name: James Morrison Peake Title: President

Signature: _____

Printed Name: JAMES MORRISON PEAKE Title: SKELLY

Signature: _____

Printed Name: JAMES MORRISON PEAKE Title: JAMES

Signature: _____

Printed Name: JAMES MORRISON PEAKE Title: COO

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)

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: SpeechRep Media, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address
3624 S. Lockwood Ridge Road

Sarasota, FL 34239

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To generate a profit consulting to businesses for marketing.

ARTICLE IV SHARES

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JAMES M. PECKE, PRES

Address: 3624 S. LOCKWOOD RIDGE ROAD

SARASOTA, FL 34239

Name and Title: JAMES M. PECKE, SECY

Address: 3624 S. LOCKWOOD RIDGE ROAD

SARASOTA, FL 34239

Name and Title: JAMES M. PECKE, TREAS.

Address: 3624 S. LOCKWOOD RIDGE ROAD

SARASOTA, FL 34239

Name and Title: JAMES M. PECKE, COO

Address: 3624 S. LOCKWOOD RIDGE ROAD

SARASOTA, FL 34239

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: James Morrison Peake
Address: 3624 S. Lockwood Ridge Road
Sarasota, FL 34239

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

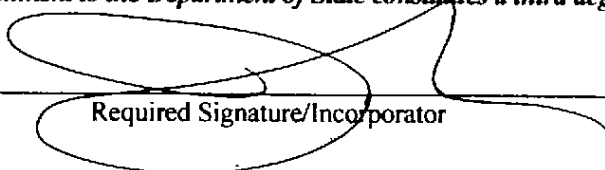
Name: James Morrison Peake
Address: 3624 S. Lockwood Ridge Road
Sarasota, FL 34239

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

05-22-2019
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

05-22-2019
Date