# P19000065/82

(Re	questor's Name)	
- (Ado	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies Certificates of Status		of Status
Special Instructions to I	Filing Officer:	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 5, 2019

SARAH BRESKMAN COSME'S OUTBOARD SERVICE, INC. 1212 W. SHORE DR. BIG PINE KEY, FL 33043

SUBJECT: COSME'S OUTBOARD SERVICE, INC

Ref. Number: W19000062416

We have received your document for COSME'S OUTBOARD SERVICE, INC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott Regulatory Specialist II New Filings Section

> . ---

Letter Number: 119A00015986

#### **COVER LETTER**

TO: Charter Section Division of Corporations
SUBJECT: Cospie's Outboard Service, 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:
Sarah Breskman Contact Person
Cosme's Outboard Service. Inc Firm/Company
1212 W. Shore Dr. Address
Big Pine Key, FL 33043 City. State and Zip Code
Southermosts arah @yahoo. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sarah Breskman at (017) 504-2905  Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
\$105.00 Filing Fees and Certificate of Status  \$\int \frac{1}{2}\$113.75 Filing Fees and Certified Copy Status  \$\int \frac{1}{2}\$113.75 Filing Fees and Certified Copy Certified Copy, and Certificate of Status
STREET ADDRESS:MAILING ADDRESS:New Filings SectionNew Filings SectionDivision of CorporationsDivision of CorporationsClifton BuildingP. O. Box 63272661 Executive Center CircleTallahassee, FL 32314

Tallahassee, FL 32301

Tallahassee, 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 Conversion is:
COSME'S OUTBOARD SERVICE LLC
Enter Name of Other Business Entity
2. The "Other Business Entity" is a
(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)
JULY 27, 2009 on
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 <u>attached Articles of Incorporation</u> : COSME'S OUTBOARD SERVICE, INC
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.

Signed	this 11 day of June	. 20 19	
Requir	ed Signature for Florida Profit Corporation:		
Signatu Incorpo Printed	orator: Director, Office Chairman, Office Chairma	er, or, if Directors or Officers have not been	n selected, an
<u>Requir</u>	ed Signature(s) on behalf of Other Business F	Entity: [See below for required signature(s	).]
Signatu	ire:		
Printed	JUAN GOSME Name:	Title: MANAGING MEMBER	
Signatu	ire:		
	Name:		
Signatu	are:		
Printed	Name:	Title:	
Signati	ire:		
Printed	Name:	Title:	
Signati	ire:		
Printed	l Name:	Title:	
Signatu	ıre:		
Printed	Name:	Title:	
	ida General Partnership or Limited Liability ure of one General Partner.	Partnership:	
	rida Limited Partnership or Limited Liability ares of ALL General Partners.	Limited Partnership:	
	rida Limited Liability Company: ure of a Member or Authorized Representative.		
All oth Signatu	ners: ure 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)

The name of the corporation shall be: OSME'S	Outboard Service, Inc
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:	
Principal street address 5670 Laurel Ave.	Mailing address, if different is: 1212 W. Shore Or.
Key West, FL 33040	Big Pine key, FL 33043
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	
All and Any Lawful.	Rusness E
	30
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRE	CTORS
Name and Title: Juan Cosme P	Name and Title: Sarah Breshman, V
Address: 1212 W. Shore Dr.	Address: 1212 W. Shore Dr. Big Pincky, Fl 33043
Big Rine Key, I-L 3=	3043 Big Pine Kuy, FL 33043
Name and Title:	Name and Title:
Address:	Address:
Name and 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: Lena Scott CPA
Address: 1107 Key Plaza 414
Key West, FL 33040
ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
Name: Sarah Breskman
Address: 1212 W. Shore Dr.
Big Pine Key, FL 33043
****
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 Provided and 10/20/2019
Required Signature/Registered Agent 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.
6/21/19
Required Signature/Incorporator Date