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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

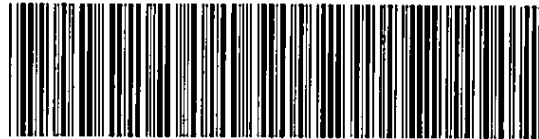
(Business Entity Name)

(Document Number)

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

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**COVER LETTER**

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** Hammer and Stain Ocala  
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:

Amy Quandt  
Contact Person

Hammer and Stain Ocala  
Firm/Company

Po Box 770501  
Address

Ocala, FL 34477  
City, State and Zip Code

hammerandstainocala@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amy Quandt  
Name of Contact Person

at ( 352 ) 229 4480  
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

**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:

Hammer and Stain Ocala LLC

Enter Name of Other Business Entity

2. The "Other Business Entity" is a LLC  
(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 May 15, 2019  
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:

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

Hammer and Stain Ocala Inc.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: May 15, 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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FILED  
TALLAHASSEE, FLORIDA

Signed this 18 day of July, 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: Amy M Quandt

Printed Name: Amy M Quandt Title: Member /

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

Signature: Amy M Quandt

Printed Name: Amy M Quandt Title: President/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)

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

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**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: Hammer and Stain Ocala Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

Principal street address

Mailing address, if different is:

6158 SW St Rd 200  
Ocala Fl 34476

Po Box 770501  
Ocala, Fl 34477

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Diy art instructional studio

**ARTICLE IV SHARES**

The number of shares of stock is: 1

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

Name and Title: Amy Quandt, President

Address: 5671 NW 25th Loop  
Ocala, Fl 34482

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

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

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

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

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CLERK

**ARTICLE VI REGISTERED AGENT**

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

Name: Amy Quandt  
Address: 5671 NW 25th Loop  
Ocala FL 34482

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Amy Quandt  
Address: 5671 NW 25th Loop  
Ocala, FL 34482

\*\*\*\*\*

*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*

Amy Quandt  
Required Signature/Registered Agent

7/18/19  
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.*

Amy Quandt  
Required Signature/Incorporator

7/18/19  
Date

CLERK OF THE COURT

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CLERK

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