

P19000 086 823

(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:

Office Use Only



700335824237

10/16/19--01010--027 **105.00

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CLERK OF COURT
JULIA A. BROWN

D. O'KEEFE
NOV 22 2019

W19-96299



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 31, 2019

EDWIN J BUDD JR.
BUddbERRY ENT.INC
5824 W SR 44
LAKE PANASOFFKEE, FL 33538

SUBJECT: BUddbERRY ENT, LLC
Ref. Number: W19000096299

We have received your document for BUddbERRY ENT, LLC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the section ' Required Signature(s) on behalf of Other Business Entity: '. A signature is required.

Please return 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.

DANIEL L O'KEEFE
Regulatory Specialist II

Letter Number: 219A00022520

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19 NOV 12 PM 11:30
TALLAHASSEE, FLORIDA

NOV 12 2019 11:34

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: BUDDBERRY ENT, 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:

EDWIN J BUDD JR

Contact Person

BUDDBERRY ENT, INC

Firm/Company

5824 W SR 44

Address

LAKE PANASOFFKEE, FL 33538

City, State and Zip Code

EDWIN BUDD@YAHOO.COM

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

For further information concerning this matter, please call:

EDWIN J BUDD JR

at (352)

697-0399

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

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19 NOV 12 PM 11:30
TALLAHASSEE, FL 32301

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:

BUddbERRY ENT, 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 FLORIDA
(Enter state, or if a non-U.S. entity, the name of the country)

on 05/22/2017
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**:

BUddbERRY ENT, 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.

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CLERK OF THE COURT
JANUARY 1, 2019

Signed this 10 day of OCTOBER, 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: [Signature]

Printed Name: EDWIN J BUDD JR Title: PRESIDENT

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

Signature: [Signature]

Printed Name: EDWIN J BUDD JR Title: MGR

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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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: BUddbERRY ENT, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

Principal street address
5824 W SR 44

LAKE PANASOFFKEE, FL 33538

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: EDWIN J BUDD JR

Address: 5824 W SR 44

LAKE PANASOFFKEE, FL 33538

Name and Title: President

Address: 5824 W. SR 44

Lake Panasoffkee, FL 33538

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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CLERK OF DISTRICT COURT
FLORIDA
13th JUDICIAL CIRCUIT IN AND FOR
DADE COUNTY

ARTICLE VI REGISTERED AGENT

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

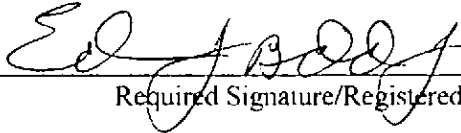
Name: EDWIN J BUDD, JR
Address: 5824 W SR 44
LAKE PANASOFFKEE, FL 33538

ARTICLE VII INCORPORATOR

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

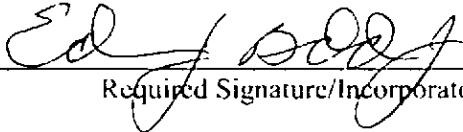
Name: EDWIN J BUDD
Address: 5824 W SR 44
LAKE PANASOFFKEE, FL 33538

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

10/10/2019
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

10/10/2019
Date

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TALLAHASSEE, FL