

P20288004864

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

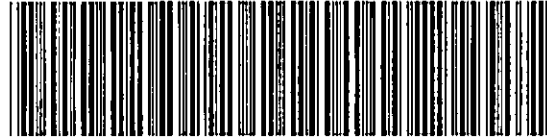
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TALLAHASSEE, FLORIDA

GreenspoonMarder^{LLP}

Lauren A. Galvani, Partner
One Boca Place
2255 Glades Road, Suite 400-E
Boca Raton, Florida 33431
Phone: 561.994.2212
Fax: 561.997.8494
Direct Phone: 561.939.2219
Direct Fax: 561.807.7521
Email: lauren.galvani@gmlaw.com

December 18, 2019

Via Federal Express

Secretary of State
Division of Corporations
New Filings Section
The Centre of Tallahassee
2415 N Monroe Street, Suite 810
Tallahassee, Florida 32303

Re: Janower Family, Inc.

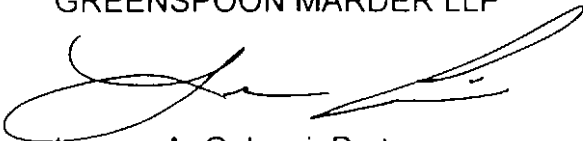
Dear Sir/Madam:

Enclosed please find Certificate of Conversion for Janower Family Inc., as well as a check in the amount of \$105.00 for the filing fee.

Should you have any questions, please do not hesitate to contact us.

Very truly yours,

GREENSPOON MARDER LLP



Lauren A. Galvani, Partner

LAG

Enclosure(s)

42057266 JLP.0003

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Janower Family Investments 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:

Laurence I. Blair, Esq.

Contact Person

Greenspoon Marder LLP

Firm/Company

2255 Glades Road, Suite 400-E

Address

Boca Raton, Florida 33431

City, State and Zip Code

julie.wysocki@gmlaw.com

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

For further information concerning this matter, please call:

Laurence I. Blair, Esq.

at (561) 9942212

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 ☐ \$113.75 Filing Fees ☐ \$122.50 Filing Fees,
and Certificate of and Certified Copy Certified Copy, and
Status Certificate of Status

Mailing Address:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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TALLAHASSEE, FLORIDA

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:

Janower Family Inc.

Enter Name of Other Business Entity

2. The "Other Business Entity" is a _____ for profit corporation
(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 Nevada
(Enter state, or if a non-U.S. entity, the name of the country)

on December 12, 2000
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**:

Janower Family Investments Inc.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: 01/01/2020

(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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TALLAHASSEE, FLORIDA

Signed this 17 day of December, 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: Todd Janower Title: President

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

Signature: [Signature]

Printed Name: Todd Janower Title: President

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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TALLAHASSEE, FLORIDA

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: Janower Family Investments Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

7723 Wind Key Drive

Boca Raton, FL 33434

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

any and all lawful purposes.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Todd Janower, President

Name and Title: _____

Address: 7723 Wind Key Drive

Address: _____

Boca Raton, FL 33434

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE VI REGISTERED AGENT

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

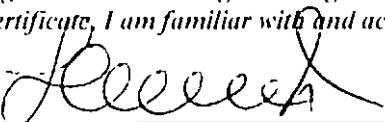
Name: Laurence I. Blair, Esq.
Address: 2255 Glades Road, Suite 400-E
Boca Raton, FL 33434

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Laurence I. Blair, Esq.
Address: 2255 Glades Road, Suite 400-E
Boca Raton, FL 33434

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

9/26/19

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.



Required Signature/Incorporator

9/26/19

Date

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TALLAHASSEE, FLORIDA