P2000011187

(Requestor's Name)	<u></u>
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT M	AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status _	
Special Instructions to Filing Officer:	

Office Use Only



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FEB 1 0 2020



January 29, 2020

HANY JEFFERY 5 ANDALUISA CT SAINT AUGUSTINE, FL 32086

SUBJECT: JEFF PODIATRY PLLC Ref. Number: W20000003196

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

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

Keyna E Page Regulatory Specialist II

Letter Number: 820A000020572



January 15, 2020

HANY JEFFERY 5 ANDALUISA CT SAINT AUGUSTINE, FL 32086

SUBJECT: JEFF PODIATRY PLLC Ref. Number: W20000003196

We have received your document for JEFF PODIATRY PLLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a fee of \$80.00 due.

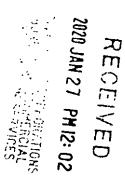
YOU HAVE SUBMITTED THE WRONG FORMS. PLEASE RETURN THE CORRECT ONES WITH THE REMAINING BALANCE NEEDED FOR FILLING.

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.

Keyna E Page Regulatory Specialist II

Letter Number: 520A00001085



COVER LETTER

TO: Charter Section Division of Co				
SUBJECT: JEFF F	PODIATRY PA			
	·····	Resulting Floric	la Profit	Corporation
	te of Conversion, Article: Profit Corporation" in ac			ees are submitted to convert an "Other Business 15, F.S.
Please return all corres	pondence concerning this	s matter to:		
HANY JEFFRY				
	Contact Person			
JEFF PODIATRY	'PA			
	Firm/Company		***	
30908 PARADIS	E COMMONS #117	, <u>.</u>	-	
FERNANDINA B	EACH, FL 32034		_	
	City, State and Zip Code	ţ		
hany.jeffry@gma E-mail address: (il.com to be used for future annu	ual report notific	ation)	
For further information	concerning this matter.	please call:		
HANY JEFFRY) 450	
Name of C	ontact Person	Area	Code and	Daytime Telephone Number
Enclosed is a check fo	r the following amount:			
☐ \$105.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Fili and Certified C		□\$122.50 Filing Fees. Certified Copy. and Certificate of Status
STREET ADDRESS: New Filings Section Division of Corporatio Clifton Building 2661 Executive Center Tallabasson FL 3230	ns · Circle		New F Division P. O. I	ING ADDRESS: ilings Section on of Corporations Box 6327 assee, 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:
JEFF PODIATRY PLLC L19000273768
Enter Name of Other Business Entity
2. The "Other Business Entity" is a Professional 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 ofFlorida
(Enter state, or if a non-U.S. entity, the name of the country)
on 11/01/2019
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:
JEFF PODIATRY PA
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.

Page 1 of 2



Signed this 5th day of February	. 20.20
Required Signature for Florida Profit Corporation:	
Signature of Chairman, Vice Charman, Director, Office Incorporator: Printed Name: Hany Jeffry Title: Director	
Required Signature(s) on behalf of Other Business E	ntity: [See below for required signature(s).]
Signature:	
Printed Name: Hany Jeffry	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Fitle:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	_Title:
If Florida General Partnership or Limited Liability I Signature of one General Partner.	'artnership:
If Florida Limited Partnership or Limited Liability I Signatures of ALL General Partners.	.imited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	
All others: Signature of an authorized person.	
Fees:	

Page 2 of 2

\$35.00

\$70,00

\$8.75 (Optional)

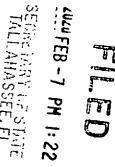
\$8.75 (Optional)

Certificate of Conversion:

Certified Copy:

Certificate of Status:

Fees for Florida Articles of Incorporation:



ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME	TDV DA
The name of the corporation shall be: JEFF PODIA	IKI FA
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
96098 Victoria's Place	30908 Paradise Commons #117
Yulee, FL 32097	Fernandina Beach, FL 32034
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
The purpose of the corporation is to engage i	n any lawful activity for which corporations
may be incorporated in the state of Florida.	
	· · · · · · · · · · · · · · · · · · ·
	··
ARTICLE IV SHARES	
The number of shares of stock is: 10,000,000	
ARTICLE V INITIAL OFFICERS AND/OR DIRE	CTORS
Name and Title: Hany Jeffry, Director	Name and Title:
Address: 30908 Paradise Commons #117	Address:
Fernandina Beach, FL 32034	
Name and Title:	Name and Title:
Address:	Address:
	7 FEB 7
Name and Title:	Name and l'itle:
Address:	Address:
	75 = 5
	2

ARTICLE				
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:				
Name:	Hany Jeffry			
Address:	30908 Paradise Commons #117			
	Fernandina Beach, FL 32034			
ARTICLE The name	and address of the Incorporator is:			
Name:	Hany Jeffry			
Address:	30908 Paradise Commons #117			
	Fernandina Beach, FL 32034			
•••••	************************	*************************		
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				
		02/05/2020		
	Required Signature/Registered Agent	Date		
		herein are true. I am aware that any false information submitted in a degree felony as provided for in s.817.155, F.S.		
		02/05/2020		
	Required Signature/Incorporator	Date		

FILED

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SEURITARY OF STATE