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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

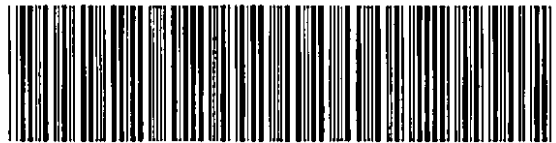
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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20 JUL -6 PM 1:57
CALL ASSISTANT LAMON

W2-50793



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 17, 2020

Corrected!

ANDREW ROHNE
4501 W DEYOUNG ST STE 200
MARION, IL 62959

SUBJECT: K9 FAMILY, INC
Ref. Number: W20000050793

We have received your document for K9 FAMILY, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the marked sections in the Articles of Conversion.

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: 820A00010366

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20 JUL -6 PM 1:57

2020 JUL -6 PM 4:20

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: **K9 FAMILY, INC.**

Name of Resulting Florida Profit Corporation

The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S.

Please return all correspondence concerning this matter to:

ANDREW ROHNE

Contact Person

THE CENTER FOR FINANCIAL LEGAL AND TAX PLANNING

Firm/Company

4501 W DEYOUNG ST STE 200

Address

MARION IL 62959

City, State and Zip Code

ANDREW@TAXPLANNING.COM

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

For further information concerning this matter, please call:

ANDREW ROHNE at **618** **997-3436**

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount: **\$35.00**; Please see attached letter dated **5/22/20** from FL Dept. of State

- ☐ \$105.00 Filing Fees and Certificate of Status
☐ \$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

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

Articles of Conversion
For
Converting Eligible Entity
Into
Florida Profit Corporation

The Articles of Conversion **and attached Articles of Incorporation** are submitted to convert the following **eligible business entity into a Florida Profit Corporation** in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:

K9 FAMILY, LLC

Enter Name of the Converting Entity

2. The converting 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 **02/26/2019**

Enter date "Converting Entity" was first organized, formed or incorporated.

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

K9 FAMILY, INC

Enter Name of Florida Profit Corporation

4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.

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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20 JUL -6 PM 1:5
TALLAHASSEE, FLORIDA

Signed this 2ND day of JUNE, 2020.

Required Signature for Florida Profit Corporation:

Signature of Director, Officer, or, if Directors or Officers have not been selected, an Incorporator:

Luis B. Marquez X

Printed Name: Luis B. Marquez, X Title: Director X
Canines and Pooches, Inc.

Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies: [See below for required signature(s).]

Signature: Luis B. Marquez

Printed Name: CANINES AND POOCHES, INC. Title: 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:

Articles 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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20 JUL -6 PM 1:57
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION
FOR RESULTING FLORIDA PROFIT CORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)**

ARTICLE I NAME

The name of the corporation shall be: K9 FAMILY, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Principal street address

8181 NW 154TH ST

STE 270

MIAMI LAKES FL 33016

Mailing address, if different is:

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 COMMON STOCK PAR VALUE (\$1)

ARTICLE V OFFICERS AND/OR DIRECTORS

Name and Title: CANINES AND POOCHES, INC-DIRECTOR

Address: 8181 NW 154TH ST STE 270

MIAMI LAKES FL 33016

Name and Title: DYNAMIC PUPPY, INC.

Address: 8181 NW 154TH STE 270

MIAMI LAKES FL 33016

Name and Title: _____

Address: _____

Name and Title: CANINE SHADOWS, INC.-DIRECTOR

Address: 8181 NW 154TH ST STE 270

MIAMI LAKES FL 33016

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: DR. BART A. BASI
Address: 603 LONGBOAT CLUB RD, UNIT 101
LONGBOAT KEY, FL 34228

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

Bart A. Basi
Required Signature/Registered Agent

06/02/2020
Date

FILED
20 JUL -6 PM 2:07
TALLAHASSEE, FLORIDA