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| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| | | |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

TO: **New Filing Section**

Division of Corporations

DREAMLINE ACCOUNTING SERVICES

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:

DIGNA L MONTANEZ

Contact Person

DREAMLINE ACCOUNTING SVCS

Firm/Company

PO BOX 780432

Address

ORLANDO, FL 32878-0432

City, State and Zip Code

dmtaxes@gmail.com

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

For further information concerning this matter, please call:

Digna Montanez

at (407)749-3416

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

and Certified Copy

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

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: |
|---|
| DREAMLINE ACCOUNTING SERVICES, LLC |
| Enter Name of the Converting Entity |
| 2. The converting entity is a Limited Liability Co. |
| (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 State of Florida |
| (Enter state, or if a non-U.S. entity, the name of the country) |
| on August 1, 2007 |
| Enter date "Converting Entity" was first organized, formed or incorporated. |
| 3. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> : DREAMLINE ACCOUNTING SERVICES, 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 officely on the date of filing, unter the officely date: January 1, 2021 |
| 5. If not effective on the date of filing, enter the effective date: |
| 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. |
| |

| Signed | this 15th day of October | . 2020 | |
|---------------------------|--|--|---------------------|
| | red Signature for Florida Profit Corporation | <u>:</u> | |
| Signati | ure of Director, Officer, or, if Directors or Offic | eers have not been selected, an Incorporator: | |
| 1 | | | |
| / Printed | Name: Digna L Montanez Title; Me | ember/Owner | |
| Requi | red Signature(s) on behalf of Converting Flounies: -{See below for required signature(s).} | | d limited liability |
| | ure Dyn A Muly | | |
| Printed | _{t Mame:} Felix Montanez√ | _{Title} Member | |
| | ure: felicatora | | # ' 20 0÷0 |
| | I Name: | Title: | 1-3 |
| Signati | ure: | | ⊃r ⊒d |
| Printed | I Name: | Title: | |
| Signati | ure: | <u> </u> | _ |
| | I Name: | | |
| Signati | ure: | | |
| Printec | ł Name: | Title: | |
| Signati | ure: | | |
| Printec | l Name: | Title: | |
| <u>If Flor</u> Signati | ida General Partnership or Limited Liabilit ure of one General Partner. | y Partnership: | |
| | r <mark>ida Limited Partnership or Limited Liabilit</mark> ures of <u>ALL</u> General Partners. | y Limited Partnership: | |
| | rida Limited Liability Company: ure of a Member or Authorized Representative. | | |
| <u>All oth</u> Signati | ners: ure of an authorized person. | | |
| Fees: | | 63.5.00 | |
| | Articles of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status: | \$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional) | |

ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION

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

| | I NAME The corporation shall be: DREAMLINE | |
|---|--|--|
| ARTICLE The principa | II PRINCIPAL OFFICE all place of business/mailing address is: | |
| | Principal street address | Mailing address, if different is: |
| 1060 | WOODCOCK RD | P.O. BOX 780432 |
| ORLA | NDO, FL 32803 | ORLANDO, FL 32878-0432 |
| ARTICLE The purpos | III PURPOSE e for which the corporation is organized is: | P.O. BOX 780432 ORLANDO, FL 32878-0432 |
| | To prance accounti | <u>.</u> |
| 7 | services to ins | Lividels on ongenies. |
| | | |
| | | |
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| | | |
| ARTICLE | IV SHARES 400 | |
| ARTICLE The number | IV SHARES of stock is: | |
| The number ARTICLE | of shares of stock is: 100 V OFFICERS AND/OR DIRECTORS | |
| The number ARTICLE | of shares of stock is: 100 V OFFICERS AND/OR DIRECTORS | |
| The number ARTICLE | of shares of stock is: | Name and Title: Address: |
| The number ARTICLE Name and | of shares of stock is: V OFFICERS AND/OR DIRECTORS Title: Digna L Montanez, President | Name and Title: |
| The number ARTICLE Name and Address: | v of Shares of Stock is: 100 V of FICERS AND/OR DIRECTORS Title: Digna L Montanez, President PO Box 780432 Orlando, FL 32878-0432 | Name and Title: Address: |
| The number ARTICLE Name and Address: | v of Stock is: 100 V of FICERS AND/OR DIRECTORS Title: Digna L Montanez, President PO Box 780432 | Name and Title: Address: Name and Title: |
| The number ARTICLE Name and Address: Name and | v of States of Stock is: 100 v of FICERS AND/OR DIRECTORS Title: Digna L Montanez, President PO Box 780432 Orlando, FL 32878-0432 Felix Montanez, VP | Name and Title: Address: Name and Title: Address: |
| The number ARTICLE Name and Address: Name and Address: | v of shares of stock is: 100 v of FICERS AND/OR DIRECTORS Title: Digna L Montanez, President PO Box 780432 Orlando, FL 32878-0432 Felix Montanez, VP PO Box 780432 Orlando, FL 32878-0432 | Name and Title: Address: Name and Title: Address: |
| The number ARTICLE Name and Address: Name and Address: | V OFFICERS AND/OR DIRECTORS Title: Digna L Montanez, President PO Box 780432 Orlando, FL 32878-0432 Felix Montanez, VP PO Box 780432 | Name and Title: Address: Name and Title: Address: |

ARTICLE VI REGISTERED AGENT

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

Name:

FELIX G MONTANEZ

Address:

Tampa, FI 33602

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