P21 000029670

(Reque	stor's Name)	
(Addres	ss)	
(Addres	 ss)	
(City/St	tate/Zip/Phone	: #)
(2.3)	,	.,
PICK-UP	TIAW	MAIL
(Rusine	ess Entity Nan	ne)
(Dusine	233 Endty Han	ne)
	 	
(Docun	nent Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filir	ng Officer:	
'	J	

Office Use Only



400361061244

03/US/21--01003--013 **122.58

2021 MAR -S AM IC: 51

Off, D

COVER LETTER

New Filing Section
Division of Corporations

TO:

SUBJECT: Expres	s Permits, Inc.						
	Name of I	Resulting Florid	da Profit	Corporation	_		
	f Conversion, Articles of ofit Corporation" in acco				rt the fol	llowing	g eligible
Please return all corresp	ondence concerning this	matter to:					
Dorothy Johns	son						
	Contact Person						
Diversified Taxe	es & Financial Se	ervices, Ind	C .				
	Firm/Company		_				
13154 Spring	Hill Dr.					2021	
	Address					1021 NAR -5	
Spring Hill, FL	34609						!
	City, State and Zip Code					#! IO: 51	
	rsifiedtaxes1.c		<u> </u>			š	
E-mail address: (t	be used for future annu	al report notifi	cation)				
For further information	concerning this matter, p		_				
Dorothy Johns	son	_ _{at (} 352	<i></i>	3-5198			
Name of Co	ontact Person	Area	Code and	l Daytime Telephone N	umber		
Enclosed is a check for	the following amount:						
□ \$105.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Fil and Certified	_	■\$122.50 Filing Fee Certified Copy, and Certificate of Status	s.		
Mailing Addr New Filing Se Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7		New I Divisi The C 2415 I	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Surassee, FL 32303	ite 810		

Articles of Conversion For Converting Eligible Entity Into Florida Profit Corporation

The Articles of Conversion <u>and attached Articles of Incorporation</u> 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	on is:		
Express Permits, LLC L/9-160946			
Enter Name of the Converting Entity	<u> </u>		
2. The converting entity is a Limited Liability Company			
(Enter entity type. Example: limited liability company, limited partnersh general partnership, common law or business trust, etc.)	nip,		
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 June 18 2019			
Enter date "Converting Entity" was first organized, formed or incorporate	ed.		
3. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorpora	ttion:		
Express Permits, Inc.			
Enter Name of Florida Profit Corporation			
4. This conversion was approved by the eligible converting entity in accordance with this chapter current/organic jurisdiction.	r and the	laws o	fits
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 Department of State.)	t is filed	by the	Florida
Note: If the date inserted in this block does not meet the applicable statutory filing requirements listed as the document's effective date on the Department of State's records.	s, this da	te will r	iot be
		i ja	
	·	<u>~</u>	
	:. -	3	
		1,	
	·	357	17

Signed:	this 25th day of February	, 20 21			
Requir	ed Signature for Florida Profit Corporation:				
•	re of Director, Officer, or, if Directors or Office	•			
	a telmander				
Printed	Name: Erica Helms Title: Pres	sident			
Requir compa	ed Signature(s) on behalf of Converting Flornies: [See below for required signature(s).]	ida partnerships, limited partnerships, a		<u>d liabil</u>	<u>lity</u>
	re- Site Helmo				
Printed	Name: Erica Helms	_{Title:} CEO			
Signatu	re:		•		
Printed	Name:	Title:	-		
Signatu	re:		-		
Printed	Name:	Title:			
Signatu	re:		-		
Printed	Name:	Title:	-		
Signatu	re:				
Printed	Name:	Title:	-		
Signati	ire:	·	-		
Printed	Name:	Title:	-		
If Flor Signate	ida General Partnership or Limited Liability are of one General Partner.	Partnership:			
	ida Limited Partnership or Limited Liability ures of <u>ALL</u> General Partners.	Limited Partnership:		2021 👸	
	ida Limited Liability Company: are of a Member or Authorized Representative.		<u>a</u> .		*9
All oth Signati	ners: are of an authorized person.			经际的	. T
Fees:	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)

The name of the na	I PRINCIPAL OFFICE		
	place of business/mailing address is:		
	Principal street address	Mailing addr	ress, if different is:
5344 9t	h Street Ste 108		
Zephryl	nills, FL 33542		
• •	for which the corporation is organized is: d All Lawful business		<u></u>
· · · · · · · · · · · · · · · · · · ·			
			
	IV SHARES of shares of stock is:		
he number o	of shares of stock is:		
The number of	of shares of stock is: 100 V OFFICERS AND/OR DIRECTORS itle: Erica Helms PVST	Name and Title:	
The number of th	v of stock is: 100 v of ficers and/or directors itle: Erica Helms PVST 5344 9th St Ste 108		
	of shares of stock is: 100 V OFFICERS AND/OR DIRECTORS itle: Erica Helms PVST	Name and Title:Address:	2)!
The number of th	v of stock is: 100 v of ficers and/or directors itle: Erica Helms PVST 5344 9th St Ste 108	Name and Title:Address:	
The number of th	v of shares of stock is: 100 v of ficers AND/OR DIRECTORS itle: Erica Helms PVST 5344 9th St Ste 108 Zephryhills, FL 33542	Name and Title: Address: Name and Title:	
The number of th	v of shares of stock is: 100 v of ficers and/or directors title: Erica Helms PVST 5344 9th St Ste 108 Zephryhills, FL 33542 itle:	Name and Title: Address: Name and Title:	22 H
The number of ARTICLE Name and Ti Address: Name and Ti Address:	v of Ficers AND/OR DIRECTORS itle: Erica Helms PVST 5344 9th St Ste 108 Zephryhills, FL 33542 itle:	Name and Title: Address: Name and Title: Address:	27.5

ARTICLE VI REGISTERED AGENT

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

Name:

Erica Helms

Address:

5344 9th Street Ste 108

Zephryhills, FL 33542

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