

P210 00056132

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

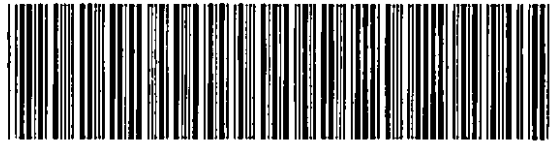
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/16/21--01032--004 **113.75

5/6/21

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21 MAY -6 PM 12:43
TALLAHASSEE, FLORIDA

W21-35062



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 16, 2021

TIAKEYSHA ELLISON
TIAKEYSHA ELLISON FINANCIAL SERVICES CORP
1800 PEMBROOK DR STE 300
ORLANDO, FL 32810

SUBJECT: TIAKEYSHA ELLISON FINANCIAL SERVICES CORP
Ref. Number: W21000035062

We have received your document for TIAKEYSHA ELLISON FINANCIAL SERVICES CORP and your check(s) totaling \$113.75. 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), s.607.1622(9) and/or 607.1622(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.

DANIEL L O'KEEFE
Regulatory Specialist II

Letter Number: 721A00005574

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TALLAHASSEE, FLORIDA

03/30/2021

Tiakeysha Ellison
1800 Pembroke Dr Ste 300
Orlando FL 32810

To Division of Corporations
Letter Number: 721A00005574

The request I sent in to change my LLC to a Corp, I would like to continue the process since my business (Doc#L19000134424) is now active and had its annual registration completed.

Manager

Tiakeysha Ellison
1800 Pembroke Dr Ste 300
Orlando FL 32810



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2021 MAY -6 AM 9:08

Daniel

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000134424

Entity Name: KB DREAMZ LLC

Current Principal Place of Business:

1800 PEMBROKE DRIVE STE 300
ORLANDO, FL 32810

Current Mailing Address:

1800 PEMBROKE DRIVE STE 300
ORLANDO, FL 32810 US

FEI Number: 84-1805135

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ELLISON, TIAKEYSHA N
1800 PEMBROKE DRIVE STE 300
ORLANDO, FL 32810 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

4/26/21
Date

Authorized Person(s) Detail :

Title MANAGER
Name ELLISON, TIAKEYSHA
Address 1800 PEMBROOK DR STE
City-State-Zip: ORLANDO FL 32810

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TALLAHASSEE, FLORIDA

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TIAKEYSHA ELLISON

MANAGER

03/19/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: TiaKeysha Ellison Financial Services Corp
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:

TiaKeysha Ellison
Contact Person

TiaKeysha Ellison Financial Services Corp
Firm/Company

1800 Pembroke Dr Ste 300
Address

Orlando FL 32810
City, State and Zip Code

info@TiaKeyshaellison.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TiaKeysha Ellison at (407) 2437152
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

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:

KB Dreamz LLC (Entity # L19000134424)
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 05-17-2019
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**:

TiaKeysha Ellison Financial Services Corp
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: 02/01/2021
(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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signed this 1st day of February, 2021.

Required Signature for Florida Profit Corporation:

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

TiaKeysha Ellis

Printed Name: TiaKeysha Ellison Title: Manager

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

Signature: TiaKeysha Ellis

Printed Name: TiaKeysha Ellison Title: Manager

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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TALLAHASSEE, FLORIDA

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**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: Tiakeysha Ellison Financial Services Corp

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

Principal street address

Mailing address, if different is:

1800 Pembroke Dr Ste 300
Orlando FL 32810

1800 Pembroke Dr Ste 300
Orlando FL 32810

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Financial Services, such as, public notary, taxes,
coaching, and credit repair.

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V OFFICERS AND/OR DIRECTORS

Name and Title: Tiakeysha Ellison Manager Name and Title: _____

Address: 1800 Pembroke Dr Ste 300 Address: _____
Orlando FL 32810

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

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: TiaKeysha Ellison

Address: 1800 Pembroke Dr Ste 300
Orlando FL 32810

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

TiaKeysha Ellison
Required Signature/Registered Agent

2/1/21
Date

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TALLAHASSEE, FLORIDA