

P21600056478

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

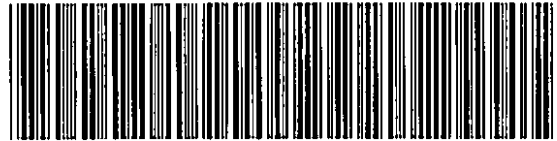
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/07/21--0101--021 *105.00

2021 JUN -7 AM 10:40

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: TWO OTHER NO OTHER 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:

ZELJKO ANDJELIC

Contact Person

SREJOVIC ACCOUNTING SERVICES LTD.

Firm/Company

2340 S RIVER RD, STE 208

Address

DES PLAINES, IL 60018

City, State and Zip Code

info@srejovicaccounting.com

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

For further information concerning this matter, please call:

LOU SREJOVIC at (773) 545-6288

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:

TWO OTHER NO OTHER INC.

Enter Name of the Converting Entity

2. The converting entity is a CORPORATION

(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 ILLINOIS

(Enter state, or if a non-U.S. entity, the name of the country)

on 2 MARCH, 2015

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:**

TWO OTHER NO OTHER 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.

2021 JUN -7 AM 10:40

Signed this 23RD day of MAY, 2021.

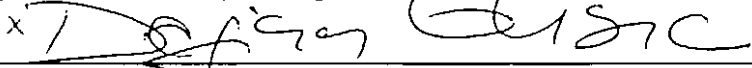
Required Signature for Florida Profit Corporation:

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

x 

Printed Name: DEJAN GLISIC Title: PRESIDENT

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

Signature: x 

Printed Name: DEJAN GLISIC Title: PRESIDENT

Signature: x 

Printed Name: TOMISLAV JOVANOVIC Title: VICE PRESIDENT

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)

**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: TWO OTHER NO OTHER INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address <u>17170 SW 49TH PL</u> <u>MIRAMAR, FL 33027</u> _____	Mailing address, if different is: _____ _____ _____
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ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE PURPOSE OF THE CORPORATION IS TO ENGAGE IN ANY AND ALL LAWFUL
ACTIVITY FOR WHICH A CORPORATION MAY NOW OR HEREAFTER BE OGANIZED
UNDER THE FLORIDA BUSINESS CORPORATION ACT.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V OFFICERS AND/OR DIRECTORS

Name and Title: <u>DEJAN GLISIC, PRESIDENT</u> Address: <u>17170 SW 49TH PL</u> <u>MIRAMAR, FL 33027</u> _____ Name and Title: _____ Address: _____ _____ Name and Title: _____ Address: _____ _____ Name and Title: _____ Address: _____ _____	Name and Title: <u>TOMISLAV JOVANOVIC, VICE PRESIDENT</u> Address: <u>760 SE 2ND AVE APT H206</u> <u>DEERFIELD BEACH, FL 33441</u> _____ Name and Title: _____ Address: _____ _____ Name and Title: _____ Address: _____ _____ Name and Title: _____ Address: _____ _____
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ARTICLE VI REGISTERED AGENT

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

Name: DEJAN GLISIC

Address: 1710 SW 49TH PL

MIRAMAR, FL 33027

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

x Dejan Glisic
Required Signature/Registered Agent

5/23/21
Date

2021 JUN -7 PM 10:40

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