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| (Requestor's Name) | | | |
|---|--|--|--|
| (Address) | | | |
| (Address) | | | |
| (CitylState (Tin/Dhane #6) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
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COVER LETTER

| TO: New Filing Section Division of Corporations | | | | |
|---|--------------------------------------|---------------------------------------|---|--------|
| SUBJECT: Permits Plus, Inc. | | | | |
| Name of | Resulting Florida | Profit (| Corporation | |
| The enclosed Articles of Conversion, Articles of entity into a "Florida Profit Corporation" in acco | | | | igible |
| Please return all correspondence concerning this | matter to: | | | |
| Christy Galas | | | | |
| Contact Person | | | | |
| Permits Plus, LLC | | | | |
| Firm/Company | | | | |
| 131 SW 70th Street | | | | |
| Address | | | | |
| 0 1 51 01170 | | | | |
| Ocala, FL 34476 | | | | |
| City, State and Zip Code | - | | | |
| ChristyGalas@gmail.com | | | | |
| E-mail address: (to be used for future annu | ial report notificat | ion) | | |
| For further information concerning this matter, | please call: | | | |
| Christy Galas | at (352 | 572 | 2-5134 | |
| Name of Contact Person | | de and | Daytime Telephone Number | |
| Enclosed is a check for the following amount: | | | | |
| \$105.00 Filing Fees | □\$113.75 Filing and Certified Co | | 本\$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 | | New F Division The Co 2415 N | Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303 | |

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 is: |
|---|
| Permits Plus, 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 it a non-0.5, entity, the name of the country) |
| on_08/09/2004 |
| 3. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u> Permits Plus, 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: |

| Signed this 23rd day of August | 2021 |
|---|---|
| Required Signature for Florida Profit Corporation: | |
| Signature of Director, Officer, or, if Directors or Office | ers have not been selected, an Incorporator: |
| Printed Name: Christy Galas Title: Man | ager |
| Required Signature(s) on behalf of Converting Flor | ida partnerships, limited partnerships, and limited liability |
| companies: [See below for required signature(s).] | |
| Signature: Christy Galas Printed Name: Christy Galas | Manager |
| Signature: | |
| Printed Name: | |
| Signature: | |
| Printed Name: | Title: |
| Signature: | |
| Printed Name: | Title: |
| Signature: | |
| Printed Name: | Title: |
| Signature: | |
| Printed Name: | Title: |
| If Florida General Partnership or Limited Liability Signature of one General Partner. | Partnership: |
| If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners. | Limited Partnership: |
| If Florida Limited Liability Company: Signature of a Member or Authorized Representative. | |
| All others: Signature of an authorized person. | |
| 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)

ARTICLE I NAME
The name of the corporation shall be: Permits Plus, Inc. PRINCIPAL OFFICE ARTICLE II The principal place of business/mailing address is: Mailing address, if different is: Principal street address 131 SW 70th Street Ocala, FL 34476 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Any lawful purpose ARTICLE IV SHARES The number of shares of stock is: 1000 ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: Christy Galas, President Name and Title:_____ 131 SW 70th Street Address: Address: Ocala, FL 34476 Name and Title:_____ Name and Title: Address: Address: Name and Title: Name and Title: Address: Address:

| | and Florida street address (P.O. Box NOT accepted | ble) of the registered agent is: |
|----------|---|--|
| Name: | Christy Galas | |
| Address: | 131 SW 70th Street | |
| | Ocala, FL 34476 | |
| | | ************************************** |
| | | 08/23/2021 |
| | Required Signature/Registered Agent | Date |