P23000054614

(Re	equestor's Name)	
, , ,	,	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
	□ \ 4 /4) =	
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Cestificates	of Status
	_ Octanioates	UI Otatus
	FIR OF	
Special Instructions to	Filing Officer.	





400411920854

07/13/23--01018--014 **70.00

02/03/23--01019--013 **35.00

5-22-3





FLORIDA DEPARTMENT OF STATE Division of Corporations

April 28, 2023

ROBERT B. JONES, CPA JONES & MALHOTRA, CPAS 825 COLORADO BLVD., STE. 219 LOS ANGELES, CA 90041

SUBJECT: RONALD T. ANDERSON, INC.

Ref. Number: W23000057191

We have received your document for RONALD T. ANDERSON, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The complete set of conversion forms are enclosed. In addition to the Articles of Conversion, the Articles of Incorporation must also be completed. Please complete and return all forms along with an additional payment of \$70.00.

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: 023A00008817

COVER LETTER

	New Filing Sec Division of Cor				
SUBJE	СТ:		nderson I. Resulting Florida Protit	Corporation	
		f Conversion, Articles of ofit Corporation" in acco		are submitted to convert t 33 & 607.0202, F.S.	he following eligible
Please r	eturn all corresp	ondence concerning this	matter to:		i
	Robert	TOWNS Contact Person			
<u></u>	Topes	MOJNOTYO~ Firm/Company	CPAS		
	300 P	PCCEST #	3		
	Holles	City, State and Zip Code	, 33019		
E-	mail address: (t	o be used for future annu	nal report notification)		
For furt	her information	concerning this matter, j	please call:		
<u> </u>	Name of Co	One S ontact Person	at (<u>373</u>) <u>S</u> Area Code and	SC - SUCC I Daytime Telephone Num	ber
Enclose	d is a check for	the following amount:			
□ \$105	5.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filing Fees and Certified Copy	□\$122.50 Filing Fees, Certified Copy, and Certificate of Status	970 Articles of
	Mailing Addr New Filing So Division of Co P.O. Box 632	ection orporations	New F Divisi	Address: Filing Section on of Corporations entre of Tallahassee	Articles of Incorporphian only

Tallahassee, FL 32314

Previously submitted Articus Ct Conversion + 935 fee.

2415 N. Monroe Street, Suite 810

Tallahassee, 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:
RONALD T. ANDERSON, INC.	
Enter Name of the Converting Entity	·
2. The converting entity is a	F21000600336
(Enter entity type. Example: limited liability company, limited general partnership, common law or business trust, etc.)	d partnership.
first organized, formed or incorporated under the laws of CALIFORNIA (Enter state, or if a non-U.S. entity, the name of the cou	
(Enter state, or if a non-U.S. entity, the name of the cou	intry)
on 7/26/1994	
3. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of</u> RONALD T. ANDERSON, INC.	Incorporation:
Enter Name of Florida Profit Corporation	·
4. This conversion was approved by the eligible converting entity in accordance with t current/organic jurisdiction.	his chapter and the laws of its
5. If not effective on the date of filing, enter the effective date: 1/1/2023	
(The effective date: Cannot be prior to nor more than 90 days after the date this Department of State.)	document is filed by the Florida
Note: If the date inserted in this block does not meet the applicable statutory filing rec	quirements, this date will not be
listed as the document's effective date on the Department of State's records.	



Signed thisday of	. 20 ²³	
Required Signature for Florida Profit Corporation	on:	
Signature of Director, Officer, or, if Directors or Off	icers have not been selected, an Incorpora	tor:
Printed Name: RONALD T. ANDERSON Title:	NER	
Required Signature(s) on behalf of Converting Fl companies: [See below for required signature(s).]	orida partnerships, limited partnership	s, and limited liability
h G	1	
Signature:RONALD T. ANDERSON Printed Name:	Title: OWNER	
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 Liabili Signature of one General Partner.	ity Partnership:	
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative	2.	
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	T 4-01-000 Too
The name of the corporation shall be: \[\sqrt{2000d}) / mal(301), 1/10
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
300 Pierre St #3	
Hollywoods FL 33019	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Tockey agent	
- Maria	
	202 ALL 5-LI
ARTICLE IV SHARES The number of shares of stock is:	2023 HAY 22 SLUAHASSEE
ARTICLE V OFFICERS AND/OR DIRECTORS	· '{-
Name and Title: CONCIDET ANDLESCO	Name and Title:
Address: 300 Precce St #3	Address:
Houywood, Ft 33010	7
Name and Title:	Name and Title:
Address:	Address:
Name and Title:	Name and Title:
Address:	Address:

The <u>name</u>	and Florida street address (P.O. Box NOT acceptable) of the registered agent is:	
Name:	Ronard T. Anderson	,
Address:	300 Pierce St #3	
	Holywood, FL 33019	
******	*************	
Having be this certific	en named as registered agent to accept service of process for the above stated corporation at the place designat cate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	ed in
	<i>11</i>	

ARTICLE VI REGISTERED AGENT

Required Signature/Registered Agent