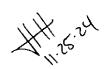
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PICK-UP	WAIT	MAIL
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(Document Number)		
Certified Copies	_ Certificates of Statu	ıs
Special Instructions to I	Filing Officer:	
	Office Use Only	



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COVER LETTER

TO: **New Filing Section** Division of Corporations

Clear Concise Vision 🚾 🗍

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:

Dwayne Stanbury

Contact Person

Clear Concise Vision

Firm/Company

4300 N university Dr suite F100

Address

Sunrise, FI 33351

City, State and Zip Code

admin@ccvisionllc.com

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

For further information concerning this matter, please call:

Dwayne Stanbury

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 and Certificate of

Status

 \blacksquare \$113.75 Filing Fees \square \$122.50 Filing Fees, and Certified Copy

Certified Copy, and 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

24 HOV 25 AM 5: 52

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.

Signed this Nov day of 12	20 24
Required Signature for Florida Profit Corp	
Pur	or Officers have not been selected, an Incorporator:
Printed Name: Dwayne Stanbury Title:	CEO
Required Signature(s) on behalf of Converteompanies: [See below for required signature.	ting Florida partnerships, limited partnerships, and limited liability $e(s)$.]
Printed Name: Dwayne Stanbu	Iry CEO
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 Signature of one General Partner.	Liability Partnership:
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	Liability Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Represe	entative.

All others: Signature of an authorized person.

Fees:

\$35.00 Articles of Conversion: \$70.00

Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status: \$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 corporation shall be: Clear Concise Vision ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Principal street address Mailing address, if different is: 4300 N university Dr sute F-100 Sunrise,FI 33351 4300 N university Dr sute F-100 Sunrise,FI 33351 ARTICLE III PURPOSE The purpose for which the corporation is organized is: To issue stocks / The number of shares of stock is: 10000 ARTICLE IV SHARES ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: Dwayne Stanbury CEO Name and Title: 4300 N university Dr sute F-100 Sunrise,FI 33351 Address: Address: Name and Title: Name and Title: _____ Address: Address: Name and Title: ______ Name and Title: ______ Address: Address:

ARTICLE VI	<u>REGISTERED AC</u>	<u>GENT</u>	
The name and F	larida etroat address	(D O Roy NO	Taccentable) of the regist

The name	and Florida street address (P.O. Box NO	T acceptable) of the registered agent is:
Name:	Dwayne Stanbury	
Address:	4300 N university Dr sute F-100	
5	Sunrise,FI 33351	

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

Required Signature/Registered Agent

11/12/2024

Date