<u>n19</u>	1006361
(Requestor's Name) (Address)	000330358410
(City/State/Zip/Phone #)	
(Business Entity Name)	88/18/1901002080 ++105.00
(Document Number)	<b>05/11/19</b> 01008008 ••30.00
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Office Use Only	
JUN 2 1 2019 T. SCOTT	



April Hosford Stone, Esq. 361 E. Hillsboro Road #201 Deertield Beach, FL 33441 (760)717-5184 aprilghosford@gmail.com

Registration Section of the Florida Division of Corporations Attn: Mr. Tyrone Scott P.O. Box 6327 Tallahassee, FL 32314

May 29, 2019

Mr. Scott.

Thank you for taking the time today to discuss the recent filing rejection pertaining to Through the Archway, Corp. (Filing No. W19000050549). As discussed, we are submitting the updated Conversion Document, Not for Profit Articles of Incorporation pursuant to Chapter 617 of the Florida Statutes, and a check for \$35.00 for the balance of the filing fee. As discussed, \$70.00 has already been applied towards filing fees with the prior document submission.

Should there be any additional issues please do not hesitate to contact me at the telephone number provided above.

Regards,

April Hosford Stone, Esq.



## **COVER LETTER**

TO: Charter Section Division of Corporations

SUBJECT: \_\_\_\_\_

Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

April Hosford Stone, Esq.

Contact Person

Firm/Company

361 E. Hillsboro Road #201

Address

Deerfield Beach, FL 33441

City, State and Zip Code

aprilghosford@gmail.com

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

For further information concerning this matter, please call:

April Hosford Stone

Name of Contact Person

\_at (<u>760</u>)717-5184 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 Centified Copy	Certified Copy, and
	Status		Certificate of Status

#### **STREET ADDRESS:**

New Filings Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## MAILING ADDRESS:

New Filings Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115; Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
Through the Archway LLC - L 800011688
Enter Name of Other Business Entity
2. The "Other Business Entity" is a
(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
(Enter state, or if a non-U.S. entity, the name of the country)
March 26, 2018
Enter date "Other Business Entity" was first organized, formed or incorporated
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
N/A

4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:

Through the Archway Corp.

Enter Name of Florida Profit Corporation

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.)

<u>Note:</u> 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.

Page 1 of 2

2019 JUR FT AH 7: 5 I

Signe	d this day of	. 20
Requi	red Signature for Florida Profit Corporatio	on:
Signat Incorp Printe	aure of Chairman, Vice Chairman, Director, Of porator:	Ticer, or, if Directors or Officers have not been selected, an
<u>Requi</u>	ure:	ss Entity: [See below for required signature(s).]
Signat Printe	eure: Peter Murinelli	Managing Member
Signat	ure: In The	Title:
	April Hosford Stone	
Signat	ure:	
Printe	d Name:	Title:
Signat	ure:	
Printe	d Name:	Title:
Signat	ure:	
Printe	d Name:	Title:
Signat	ure:	
Printe	d Name:	Title:
	r <mark>ida General Partnership or Limited Liabili</mark> ure of one General Partner.	ty Partnership:
	rida Limited Partnership or Limited Liabili ures of <u>ALL</u> General Partners.	ty Limited Partnership:
	rida Limited Liability Company; ure of a Member or Authorized Representative	2.
<u>All otl</u> Signat	hers: ure of an authorized person.	
<u>Fees:</u>	Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)
		Page 2 of 2



# **COVER LETTER**

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

# Through the Archway, Corp.

# (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

**\$70.00** Filing Fee S78.75 Filing Fee & Certificate of Status

<b>\$78.75</b>
Filing Fee
& Certified Copy

\$87.50
 Filing Fee.
 Certified Copy
 & Certificate

ADDITIONAL COPY REQUIRED

April Hosford Stone FROM:

Name (Printed or typed)

361 E. Hillsboro Road #201

Address

Deertield Beach, FL 33441

City, State & Zip

760-717-5184

Daytime Telephone number

aprilghosford@gmail.com

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

NOTE: Please provide the original and one copy of the articles.



# **ARTICLES OF INCORPORATION**

In compliance with Chapter 617, F.S., (Not for Profit)

## <u>ARTICLE I NAME</u> The name of the corporation shall be:

Through the Archway, Corp.

490	Principal <u>street</u> address: I Godfrey Road		Mailing address, if different is:
Park	and, FL 33067		
RTICLE III ne purpose f o individuals	s wishing to implement a spiritual solutio	The Corporation is or on to drug and alcohol	ganized for the exclusive purpose of providing a read distribution as an alternative or supplement to tradition
RTICLE IV	<u>MANNER OF ELECTION</u> The ma	anner in which the dire	ctors are elected and appointed:
	· · · · · · · · · · · · · · · · · · ·		ctors are elected and appointed:
RTICLE V	INITIAL OFFICERS AND/OR DIRI		Ryan Graall, CEO
RTICLE V	INITIAL OFFICERS AND/OR DIRI	ECTORS	Ryan Graall, CEO
TICLE V	INITIAL OFFICERS AND/OR DIRL Peter Marinelli, CEO	ECTORS Name and Title	Ryan Croall. CFO
RTICLE V ame and Titl Idress	INITIAL OFFICERS AND/OR DIRI e: Peter Marinelli, CEO 4901 Godfrey Road Parkland, FL 33067	ECTORS Name and Title Address:	Ryan Croall, CFO 4901 Godfrey Road Parkland, FL 33067
<u>RTICLE V</u> ame and Titl ddress ame and Titl	INITIAL OFFICERS AND/OR DIRL Peter Marinelli, CEO 4901 Godfrey Road Parkland, FL 33067 Le: Joseph Patrick Walker, Director	ECTORS Name and Title Address: Name and Title.	Ryan Croall. CFO 4901 Godfrey Road Parkland, FL 33067
<u>RTICLE V</u> ame and Titl ddress ame and Titl	INITIAL OFFICERS AND/OR DIRL Peter Marinelli, CEO 4901 Godfrey Road Parkland, FL 33067 Le: Joseph Patrick Walker, Director	ECTORS Name and Title Address:	Ryan Croall. CFO 4901 Godfrey Road Parkland, FL 33067
RTICLE IV RTICLE V ame and Titl ddress ame and Titl ddress	INITIAL OFFICERS AND/OR DIRI Peter Marinelli, CEO 4901 Godfrey Road Parkland, FL 33067 He: Joseph Patrick Walker, Director 4901 Godfrey Road	ECTORS          Name and Title         Address:         Name and Title:         Address:         Address:	Ryan Croall. CFO 4901 Godfrey Road Parkland, FL 33067

Name and Title:_	Name and Title:
Address	Address:
-	
Name and Title:_	Name and Title:
Address	Address:
_	
he <u>name and Fl</u>	<u>EGISTERED AGENT</u> rida street address (P.O. Box NOT acceptable) of the registered agent is: April Hosford Stone Eso
The <u>name and Fl</u> Name:	rida street address (P.O. Box NOT acceptable) of the registered agent is: April Hosford Stone, Esq.
The <u>name and Fl</u>	rida street address (P.O. Box NOT acceptable) of the registered agent is:
The <u>name and Fl</u> Name: Address: ARTICLE VII	rida street address (P.O. Box NOT acceptable) of the registered agent is: April Hosford Stone, Esq. 361 E. Hillsboro Road #201
The <u>name and Fl</u> Name: Address: <u>ARTICLE VII</u> The <u>name and ad</u> Name:	rida street address (P.O. Box NOT acceptable) of the registered agent is:         April Hosford Stone, Esq.         361 E. Hillsboro Road #201         Deerfield Beach, FL 33441         NCORPORATOR         Iress of the Incorporator is:         Ryan Croall

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.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I<sub>i</sub>am familiar with and accept the appointment as registered agent and agree to act in this capacity

Required Signature of Registered Agent

May 31, 201.7 Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature of Incorporator

5/3//2019 Date