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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2020 JAN 26 PM 1:54

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TO: New Filing Section
Division of Corporations

SUBJECT: PB GROUP OF VOLUSIA, 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:

Christopher T. Massebeau

Contact Person

Firm/Company

880 Airport Rd., Ste. 112-A

Address

Ormond Beach, FL 32174

City, State and Zip Code

numberbox953@gmail.com

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

For further information concerning this matter, please call:

Name of Contact Person _____ at (_____) _____
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 ☒ \$113.75 Filing Fees and Certified Copy ☐ \$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

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Certificate of Conversion
For
"Other Business Entity"
Into
Florida ~~Profit~~ Corporation
Non-Profit

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~~ ^{607.1115}, Florida Statutes.
Non-Profit ⁶⁰⁷

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

PB Group of Volusia LLC

Enter Name of Other Business Entity

2. The "Other Business Entity" is a Limited Liability 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 Florida
(Enter state, or if a non-U.S. entity, the name of the country)

on 2-24-12
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:

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

PB Group of Volusia, Inc.

Enter Name of Florida ~~Profit~~ Corporation
Non-Profit

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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signed this 23rd day of January, 2020.

16c Profit
Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Rochelle M. Clark

Printed Name: Rochelle M. Clark Title: Treasury

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: Chris Allen

Printed Name: Christopher T. Hissop Title: MGRM

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 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:

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

ARTICLE I NAME

The name of the corporation shall be:

PB Group of Volusia, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

880 Airport Rd, Ste 112-A 1513 Culverhouse Dr
Ormond Bch, FL 32174 Holly Hill, FL 32117

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

We are a networking group using our
clubs for community activities. We
are a membership organization.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: as stated
in our bylaws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Coby Moore - Pres

Address

1133 N Young St
Ormond Bch, FL
32174

Name and Title:

Rochelle Clark - Treas

Address:

1513 Culverhouse Dr
Holly Hill, FL 32117

Name and Title:

Dustin Lee - Vice Pres

Address

301 Division Ave
Ste B
Ormond Bch, FL 32174

Name and Title:

Name and Title:

Christopher T. Massdon

Address

880 Airport Rd - Ste 112-A
Ormond Beach, FL
32174

Address:

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Numberbox Accounting Service, Inc

Address: 1513 Culverhouse Dr
Holly Hill, FL 32117

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Rochelle M. Clark

Address: 1513 Culverhouse Dr
Holly Hill, FL 32117

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL.)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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 am familiar with and accept the appointment as registered agent and agree to act in this capacity

Rochelle M. Clark
Required Signature of Registered Agent

1/23/2020
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.

Rochelle M. Clark
Required Signature of Incorporator

1/23/2020
Date