## N24000009935

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W 24 000109493





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08/22/24--01032--001 \*\*70.00

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August 1, 2024

NEEL DHURUVA 18660 SW 33RD CT MIRAMAR, FL 33029 US

SUBJECT: P2P GLOBAL TEENS Ref. Number: W24000109493

There is a fee of \$70.00 due.

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Section 617.0202(d). Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

If you have any further questions concerning your document, please call (850) 245-6052.

KAIN COSTELLO Regulatory Specialist II New Filing Section

Letter Number: 924A00017092

Certificate of Conversion
For

\*\*Other Business Entity\*\*
Into

Florida Profit Corporation
NonFrofit

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.

NOM Profit	
1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:	
P2P GLOBAL TEENS LLC Enter Name of Other Business Entity	
2. The "Other Business Entity" is a NON PROFIT  (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	
on 06-10-24	
Enter date "Other Business Entity" was first organized, formed or incorporated	
<ol> <li>If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is not organized, formed or incorporated:</li> </ol>	₩
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:  P2P GLOBAL TEENS CORPORATION  Enter Name of Florida Profit Corporation	
Non The of C	
5. If not effective on the date of filing, enter the effective date: 07-07-24.  The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Floric Depurtment of State.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be	le
isted as the document's effective date on the Department of State's records.	

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Signe	d this _	07	day of	JULY		_, 20_ <b>2_4</b>	
Requ	ired Sig	uature fo	श्वरतिष् or Florida <del>Prof</del> i	#: it Cornoration:			
							not been selected, an
						D_AGENT	
Requ.	ired Sig	nature(s)	on behalf of O	ther Business E		ow for required sig	
Signul	ture:	$-\tilde{n}$	MA				
						nager_	<del></del>
Signat	.ure:					<u> </u>	<del></del>
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Printe	d Name:	·			_ Title:		
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Signati	ure:				<u> </u>		<del></del>
Printec	i Name:				_ Title:		<del></del>
If Flor Signati	ida Ger ure of or	neral Par	tnership or Lis J Partner.	mited Liability	Partnership:	,	
If Flor Signati	ida Lin ares of A	ited Par	tnership or Literal Partners.	nited Liability	Limited Partne	ership:	
If Flor Signati	ida Lin we of a	nited Lial Member	bility Compan or Authorized F	<u>v:</u> Representative.			
All otb Signati		authoriz	ed person.			,	•
<u>Fees:</u>	Fees fo		onversion: Articles of Inc. ans:	orporation:	\$35.00 \$70.00 \$8.75 (Option \$8.75 (Option	- 2	

Page 2 of 2

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

	and desperanted share be	AL TEENS CORPORATION
RTICLE I	I PRINCIPAL OFFICE	
	Principal street address:	Mailing address, if different is:
	18660 SW 33 COURT	
	MIRAMAR, FL 33029	
		•
IRTICLE I	II PURPOSE	
The purpose	for which the corporation is organized is:	·
To	Support underprive by	ED TEENS WITH PROVIDING SUPPORT
		,
		• •
<u>IRTICLE I</u>	V MANNER OF ELECTION The manne	or in which the directors are elected and appointed: $\frac{\beta y/q w s}{}$
(RT)CLE I	V MANNER OF ELECTION The manner	r in which the directors are elected and appointed: Byla w 5
<del></del>		
	W MANNER OF ELECTION The manne  V INITIAL OFFICERS AND/OR DIRECT	
RTICLE V	/ INITIAL OFFICERS AND/OR DIRECT	ORS
Vame and T	INITIAL OFFICERS ANDWOR DIRECT	ORS  Name and Title:
Vame and T	INITIAL OFFICERS ANDWOR DIRECTOR  itle: NEEL DHURWA - FOUNDS  18660 S.W. 33 CT	ORS  Name and Title:  Address:
RTICLE V	INITIAL OFFICERS ANDWOR DIRECT	ORS  Name and Title:  Address:
RTICLE V	INITIAL OFFICERS ANDWOR DIRECTOR  INCEL DHURWA - FOUNDE  18660 SW. 33 CT  MIRAMAR, FL 33-24	Name and Title:Address:
RTICLE V	INITIAL OFFICERS ANDWOR DIRECTOR  itle: NEEL DHURWA - FOUNDS  18660 S.W. 33 CT	Name and Title:Address:
Vame and T Address	INITIAL OFFICERS ANDWOR DIRECTOR  INCEL DHURWA - FOUNDE  18660 SW. 33 CT  MIRAMAR, FL 33-24	Name and Title:  Address:  Name and Title:
RTICLE V Vame and T Address	INITIAL OFFICERS ANDWOR DIRECTOR  INEEL DHURWA - FOUNDA  18660 SW. 33 CT  MIRAMAR, FL 33-24  IIIIc: PARIMALA RAJAN P  18660 SW. 33 CT	Name and Title:  Address:  Name and Title:  Address:
RTICLE V Vame and T Address	INITIAL OFFICERS AND OR DIRECTOR  Title: NEEL DHURWA - FOUNDO  18660 SW. 33 CT  MIRAMAR, FL 33-24  Title: PARIMALA RAJAN P	Name and Title:  Address:  Name and Title:  Address:
Name and T	INITIAL OFFICERS ANDWOR DIRECTOR  ILLE: NEEL DHURWA - FOUNDE  18660 SW. 33 CT  MIRAMAR, FL 33021  MIRAMAR, FL 33021	Name and Title:  Address:  Name and Title:  Address:
Vame and T Address Name and T Address	INITIAL OFFICERS ANDWOR DIRECTOR  INCEL DHURWA - FOUNDA  18660 SW. 33 CT  MIRAMAR, FL. 33029  INITIAL OFFICERS ANDWOR DIRECTOR  INITIAL OFFICE	Name and Title:  Address:  Name and Title:  Address:
Vame and T Address Name and T	INITIAL OFFICERS ANDWOR DIRECTOR  ILLE: NEEL DHURWA - FOUNDE  18660 SW. 33 CT  MIRAMAR, FL 33021  MIRAMAR, FL 33021	Name and Title:  Address:  Name and Title:  Address:
Vame and T Address Name and T Address	INITIAL OFFICERS ANDWOR DIRECTOR  INCEL DHURWA - FOUNDA  18660 SW. 33 CT  MIRAMAR, FL. 33029  INITIAL OFFICERS ANDWOR DIRECTOR  INITIAL OFFICE	Name and Title:  Address:  Name and Title:  Address:

Name and Title:	Name and Title:
Address	Address:
Name and Title:	Name and Title:
Address	Address:
_	
	<u> </u>
	•
	EGISTERED AGENT rida street address (P.O. Box NOT acceptable) of the registered agent is:
Name:	NEEL DHURUNA
Address:	18660 5.W. 33" CT
	MIRAMPR, FL 33029
	INCORPORATOR Iress of the Incorporator is:
Name:	NEEL DHURUVA
Address:	18660 S.W. 33 CT.
	MIRAMAR, FL 33029
	EFFECTIVE DATE:
	other than the date of filing: (OPTIONAL)  te is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)
	inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ive date on the Department of State's records.
Having been nam certificate, I am fa	ted as registered agent to accept service of process for the above stated corporation at the place designated in Trailiar with and accept the appointment as registered agent and agree to act in this capacity
	Required Signature of Registered Agent  Date
I submit this docu the Department of	ment and affirm that the facts stated herein are true. I am aware that any false information submitted in a docume State constitutes a third degree felony as provided for in s.817.155, F.S.
	Required Signature of Incorporator  Pate
	Required Signature of Incorporator Date

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