P10000068919

(Requestor's Name)					
(Address)					
(1331333)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
On the state of Orange					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
openia non management					

Office Use Only



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2010 AUG 20 AM M: 26 SEGRETARY OF STATE TALLAHASSEE, FLORIDA

T. CLINE

AUG 23 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 10, 2010

JILL FASEL DISALVO & ASSOCIATES 1760 N. JOG ROAD, SUITE 150 WEST PALM BEACH, FL 33411

SUBJECT: DISALVO & ASSOCIATES, P.A.

Ref. Number: W10000037562

We have received your document for DISALVO & ASSOCIATES, P.A. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Incorporation, if any.

The specific business purpose of the professional association must be stated in the document.

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) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 310A00019186

COVER LETTER

TO:	Registration S Division of C				
SUBJI	ECT: DiSal	vo & Associates,			··· ·
		Name of Resulti	ng Florida Profit Corpor	ation	
conver				on, and fees are submoration" in accordance	
Please	return all corr	espondence concernin	g this matter to:		
		Jill Fasel			
		Contact Person			
	DiSal	vo & Associates, P.	A	نام. محمد	28
		Firm/Company		- (T	一百五
1760 N. Jog Road, Suite 150			150		2010 AUG 20
		Address			
		Palm Beach, FL 334	111		MH: 25 OF STATE
	C	City, State and Zip Code			25 25 26
	idi	asel@d-acpa.com			``J.**
E-	mail address: (to	be used for future annual	report notification)		
For fur	ther informati	on concerning this ma	atter, please call:		
	Jill	Fasel	at (561)	659-1177	
	Name of Cor		—·"· \/_	aytime Telephone Number	
Enclos	ed is a check t	For the following amou	unt:		
\$105	.00 Filing Fees	\$113.75 Filing Fees and Certificate of Status	\$113.75 Filing Fee and Certified Copy	\$122.50 Filing Fe Certified Copy, and Certificate of Status	es,
Registr Division Clifton	ET ADDRES ration Section on of Corporat Building executive Cent	ions	Registration Division on P. O. Box	f Corporations	

Tallahassee, FL 32301

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

This Certificate of Conversion <u>and attached Articles of Incorporation</u> 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:		
DiSalvo Financial S	Services, LLC	٠. ١
Enter Name of Other		
2. The "Other Business Entity" is a L (Enter entity type. Example: limited liability)	lity company, limited partnership,	NETURY AHASSE
general partnership, common law or liferst organized, formed or incorporated under the liferst organized.	laws of Florida	E. FLOR
(Enter state, or if a non-U.S. enti	ity, the name of the country)	<u> </u>
on November 26	, 2008	
Enter date "Other Business Entity" was fi		ted .
3. If the jurisdiction of the "Other Business Entity the laws of which it is now organized, formed or i		y under
4. The name of the Florida Profit Corporation as sincorporation:	set forth in the <u>attached Articles o</u>	<u>f</u>
DiSalvo & Associa	ates, P.A.	
Enter Name of Florida	Profit Corporation	
5. If not effective on the date of filing, enter the e (The effective date: 1) cannot be prior to nor n document is filed by the Florida Department of effective date listed in the attached Articles of I therein.)	nore than 90 days after the date to State; AND 2) must be the same	as the

Signed this 16th day of A	vugust , 20_10						
Required Signature for Florida Profit Corp	ooration:						
Signature of Chairman, Vice Chairman Dings been selected, an Incorporator: Printed Name: Patrick J. DiSalvo	tor, Officer, or, if Directors or Office Officer	rs have not					
Required Signature(s) on behalf of Other Bu signature(s) Signature:	siness Entity: [See below for required						
Signature: Printed Name: Patrick J. DiSalvo	Title: Managing Director						
•							
Signature:Printed Name:	Title:	7 _S					
Signature:	<u>.</u> [TEORET CO					
Printed Name:	Title:	G 20					
Signature:		<u> </u>					
Printed Name:	Title:						
Signature:		R: 26					
Printed Name:	Title:	700					
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 Representation	tative.						
All others: Signature of an authorized person.							
Fees: Certificate of Conversion: Fees for Florida Articles of Incorporat Certified Copy: Certificate of Status:	\$35.00 ion: \$70.00 \$ 8.75 (Optional) \$ 8.75 (Optional)						

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

DiSalvo & Associates, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1760 N. Jog Road, Suite 150, West Palm Beach, FL 33411

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Certified Public Accounting firm

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Patrick J. DiSalvo, Officer

1684 Flagler Parkway, West Palm Beach, FL 33411

REGISTERED AGENT

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

DFS Agent, LLC

1760 N. Jog Road, Suite 150

West Palm Beach, FL 33411

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Patrick DiSalvo

1760 N. Jog Road, Suite 150, West Palm Beach, FL 33411

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

ignature/Registered Agent

ignature/Incorporator