

P110000011348

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

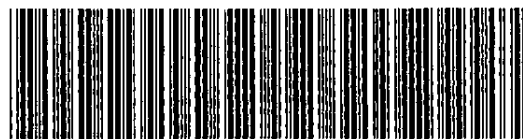
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200190731372

01/14/11--01025--013 **60.00

200190731372
01/31/11--01025--018 **62.50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK
FEB - 2 2011
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pediatric Behavioral Services Co

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:

Ryan Gilliam

Contact Person

Pediatric Behavioral Services

Firm/Company

4123 University Blvd South Suite C

Address

Jacksonville, Florida 32216

City, State and Zip Code

ryan.gilliam@pediatricbehavioralservices.com

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

For further information concerning this matter, please call:

Ryan Gilliam

at (904) 514-2437

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

☐ \$113.75 Filing Fees
and Certified Copy

☒ \$122.50 Filing Fees,
Certified Copy, and
Certificate of Status

STREET ADDRESS:

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

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

Pediatric Behavioral Services, LLC

L10000022334

Enter Name of Other Business Entity

2. The "Other Business Entity" is a Small Business 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 03/01/2010

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:

FLORIDA

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

Pediatric Behavioral Services Co.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: _____.

(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; **AND** 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting the conversion.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

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STATE
TALLAHASSEE, FLORIDA

Signed this 24 day of JANUARY, 20 11.

Required Signature for Florida Profit Corporation:

Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Ryan Gilliam

Printed Name: Ryan Gilliam Title: Director

Required Signature(s) on behalf of Other Business Entity: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).]

Signature: Alysia Gilliam
Printed Name: Alysia Gilliam Title: CEO

Signature: Ryan Gilliam
Printed Name: Ryan Gilliam Title: COO

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)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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: **PEDIATRIC BEHAVIORAL SERVICES CO.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
4123 University Blvd South Suite C
Jacksonville, FL 32216

Mailing address, if different is:

4123 University Blvd South Suite C
Jacksonville, FL 32216

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business. To engage in any other trade or business which can, in the opinion of the owners of the corporation, be advantageously carried on in connection with or auxiliary to the foregoing business.

ARTICLE IV SHARES

The number of shares of stock is: **1000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ALYSIA GILLIAM / MGRM

Address: 2534 SUMMIT VIEW DRIVE
Jacksonville, FL 32210

Name and Title: RYAN GILLIAM / MGRM

Address: 2534 SUMMIT VIEW DRIVE
Jacksonville, FL 32210

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

RYAN GILLIAM

ARTICLE VI REGISTERED AGENT

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

Name: RYAN GILLIAM

Address: 2534 SUMMIT VIEW DRIVE
Jacksonville, FL 32210

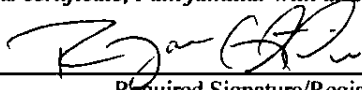
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: RYAN GILLIAM

Address: 2534 SUMMIT VIEW DRIVE
Jacksonville, FL 32210

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

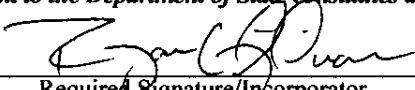


Required Signature/Registered Agent

1/24/11

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/Incorporator

1/24/11

Date

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11 JAN 31 PM 3:20
STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 18, 2011

RAYAN GILLIAM
PEDIATRIC BEHAVIORAL SERVICES
4123 UNIVERSITY BLVD. SOUTH, SUITE C
JACKSONVILLE, FL 32216

SUBJECT: PEDIATRIC BEHAVIORAL SERVICES, LLC
Ref. Number: L10000022334

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for PEDIATRIC BEHAVIORAL SERVICES, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law does not allow a sole proprietorship to file a conversion. A sole proprietorship is a business owned and operated by one individual. As a sole proprietor, the one individual owner is responsible for making all of the business decisions and all of the debts of the business are considered to be the debts of the one individual owner, as well. The sole proprietorship may or may not conduct business under the one individual owner's legal name. Because the business and the individual are considered as one organization and need each other to co-exist from a legal perspective, a sole proprietorship is not considered a business entity and cannot, therefore, file a conversion under Florida law.

If your sole proprietorship is actually owned and operated by two or more individuals and those individuals serve in the capacity of a partner, your business may not be a sole proprietorship. Your business may meet the definition of a partnership in accordance with Chapter 620, Florida Statutes. Chapter 620, Florida Statutes, allows a partnership to file a conversion. However, the partnership must first file a statement of registration in accordance with section 620.8105, Florida Statutes.

We are enclosing a statement of registration should your business entity meet the criteria of a partnership and you wish to proceed with the conversion. Please note the fee to register a partnership is \$50. To proceed with the conversion, please correct your conversion documents to reflect your current business entity is a partnership and resubmit the conversion documents along with the enclosed registration statement and an additional fee of \$50.

This office strongly suggests that you seek legal advice concerning this matter.

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) 245-6028.

Barbara Bostick
Regulatory Specialist II

Letter Number: 711A00001461

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA