# #P/200000/325

(Requestor's Name)
(Address)
(Address)
(1001000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
Certified Copies Certificates of Status
Octanica copies
Special Instructions to Filing Officer:
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SECRETARY OF STATE

EXAMINER 2012

#### **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: Coaching, Counseling & Consulting, Inc.

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:

☑ \$105.00 Filing Fees	and Certificate of Status	■\$113.75 Filing F and Certified Copy	ces \$\Bigsiz\$ \$\
Enclosed is a check	for the following amou	int:	
: Name of Cor	ntact Person	Area Code and	Daytime Telephone Number 🦠 🖰
Natalya Soshnikova		at ( 941 )	275-2785 🕺 🐪
For further informati	on concerning this ma	tter, please call:	
		•	
natalya@srqlawg	roup.com be used for future annual r	enort notification)	
	City, State and Zip Code	<u></u>	
Sarasota, Florida,	34236	v :	
	Address		Commence of the second
1990 Main Street, S			The second of the
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Soshnikova Law	Group PA	÷	
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Natalya Soshnikov	a, Esq.	. , , ,	
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#### 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

## FILED

### **Certificate of Conversion** For "Other Business Entity"

Into

Florida Profit Corporation

11 DEC 22 PM 4: 08 SECRETARY OF STATE JALLAHASSEE, FLORIDA

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:
Coaching, Counseling & Consulting, LLC #LIIOO0113189
Enter Name of Other Business Entity
2. The "Other Business Entity" is a Limited Liability Company
(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)
40/04/2014
on 10/01/2011  Enter date "Other Business Entity" was first organized, formed or incorporated
Enter date Other Dusiness Entity was first organized, formed or meorporated
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:
Coaching, Counseling & Consulting, INC.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: 01/01/2012  (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.

Page 1 of 2 .

currently organized, formed or incorporated.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

Signed this 21st . day of December	, 20 11	<i>:</i> ·
a third degree felony as provided for in s.	tated in this document are true. Any false inform 817,155, F.S.	
Signature of Chairman, Vice Chairman, Selected, an Incorporator: Printed Name: Christopher D. Waters	Fitle: Director	e not b <b>e</b> en
Required Signature(s) on behalf of Othe	r Business Entity: Individual(s) signing affirm(s e information constitutes a third degree felony a	s provided for in
Printed Name: Christopher D. Waters	Title: MGRM	<u> </u>
Signature: Printed Name:	Title:	<b>-</b>
Signature:Printed Namc:	Title:	<u>-</u>
Signature:Printed Name:	Title:	<del>-</del>
Signature:Printed Name:	Title:	<u></u>
Signature:Printed Name:	Tisle:	<del>-</del>
If Florida General Partnership or Limit Signature of one General Partner.	ted Liability Partnership:	
If Florida Limited Partnership or Limit Signatures of ALL General Partners,	ed Liability Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Rep	resentative.	
All others: Signature of an authorized person.		
Fees:  Certificate of Conversion; Fees for Florida Articles of Incor Certified Copy: Certificate of Status:	\$35.00 rporation: \$70.00 \$8.75 (Optional) \$8.75 (Optional)	

Page 2 of 2

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

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Principal street address  5342 Huntingwood CI Sameoia, Foodia 34235  RTICLE III PURPOSE he purpose for which the corporation is organized is:  The purposes of the Corporation are to engage in any activity of business permitted under the laws of the United States and the State of Florid  RTICLE IV SHARES he number of shares of stock is:  100  RTICLE V INITIAL OPTICERS AND/OR DIRECTORS  Name and Title: Orthophe D. Water. Streets  Address: Set Pure groot CI Address: Set Pure groot CI Address: Address: Address:  Name and Title: Name and Title: Address:  Name and Title: Name and Title: Address:  Name and Title: Name and Title: Address:  Principal D. Water  RETICLE VI REGISTERED AGENT he pame and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name: Chaspine D. Water Address: Set Principal D. Water Address: Set Principal D. Water  Address: Basson, Foods 34235  RETICLE VII INCORPORATOR he name and address of the Incorporator is: Name: Manuel Stocked Sto	RTICLE II	corporation shall be: Coaching,		
### SHAPMINING CONTROLL OF THE		Principal street address		Mailing address, if different is:
RTICLE III PURPOSE  the purpose for which the corporation are to engage in any activity of business permitted under the laws of the United States and the State of Florid  RTICLE IV SHARES  the number of shares of stock is:  100  RTICLE V INITIAL OFFICES AND/OR DIRECTORS  Name and Title: Officeshed D. Wellers, Director  Address:  Server, Florida 5423 And States, Chiefla 5423.  Name and Title: Address:  RTICLE VI REGISTERED AGENT  To name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name: Christopher D. Wellers  RATICLE VII INCORPORATOR  To name and address of the Incorporator is:  Name: Name and address of the Incorporator is:  Name: Name and address in familiar with dried decipt (heighprointment as registered agent and agree to ad in this capacity  Required Signature/Registered Agent  Required Signature/Registered Agent  Pate  Pate  Pate  Pate  Required Signature/Registered Agent  Pate  P	5342 H	untingwood Ct	<u> </u>	and the second of the second
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The purposes of the Corporation are to engage in any activity of business permitted under the laws of the United States and the State of Florid RTICLE IV SHARES  The number of shares of stock is: 100  RTICLE V INITIAL OFFICERS AND/OR DIRECTORS  Name and Title:  Address:  State the produce of the Address:  Address:  Address:  Name and Title:  Address:  Address:  RTICLE VI REGISTERED AGENT  The pame and Riorida street address (P.O. Box NOT acceptable) of the registered agent is:  Name:  Champhon D. Water  Address:	RTICLE III	PURPOSE		•
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RTICLE IV SHARES  Name and Title: Christoper D. When. Director  Address: Satz Paratropers Co: Address:  Barasota, Florida 54235  Name and Title: Address:  RTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name: Christopher D. Waters  Address: Satz Paratropher D. Waters  Address: Satz Paratropher D. Waters  RTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name: Name: Name: Nation Societies, Etc.  Address: Satz Paratropher D. Satz (P.O. Box TO)  Barason, Florida 34230  Garding beeft named as Jegistered agent to accept Sorvice of process for the above stated corporation at the place designated as certificate, I am familiar with arts accept the agent the appointment and agree to act in this capacity  Required Signature/Registered Agent  Submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in	· · · · · · · · · · · · · · · · · · ·			
TRICLE V INITIAL OFFICERS AND/OR DIRECTORS  Name and Title: Christophe D. Waters. Circuit  Address:			, .	
TRICLE V INITIAL OFFICERS AND/OR DIRECTORS  Name and Title: Orthopher D. Wester, Director Address: Service, Priorice 34235  Name and Title: Address: Address:  Name and Title: Address: Addr	The purposes of t	he Corporation are to engage in any activity of bu	isiness permitted under the la	aws of the United States and the State of Florid
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Name and Title: Address:  Ontainable D. Water  Address:  Address:  Address:  Article VII REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address:  SAN Huntingwood CI  Bernsta, Florida 34233  EFFECTIVE DATE  Ol/O1/2012  The name and address of the Incorporator is: Name:				· <u></u>
Name and Title: Address:  Ovvientable.D. Westers  Address:  Printiple of the registered agent is: Name: Address:  Sex 2 thursing mood C1  Burracto, Florida 34233  EFFECTIVE DATE  RTICLE VII INCORPORATOR  The name and address of the Incorporator is: Name: Address:  Sex 2 thursing begin and address of the Incorporator is: Name: Name: Name: Address:  Sex 2 thursing begin address of the Incorporator is: Name: Nam	Addiess.		Address:	
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Address:  RTICLE VI REGISTERED AGENT  the name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name:  Address:  SAU Huringwood CI  Barrasota, Florida 34235  RTICLE VII INCORPORATOR  the name and address of the Incorporator is:  Name:  Address:  Name:  Nature Stated Bened, Butto 750  Sarasota, Florida 34236  Iaving been named as registered agent to accept service of process for the above stated corporation at the place designated ais certificate, and familiar with drift accept the approximent as registered agent and agree to act in this capacity  Required Signature/Registered Agent  Submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in	Address:	·	Address:	
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RTICLE VI REGISTERED AGENT  the name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name: Address: Salt Huntingwood Ci Barasota, Florida 34235  RTICLE VII INCORPORATOR  the name and address of the Incorporator is:  Name: Name: Address: 1990 Main Street, Butte 1848  Sarasota, Florida 34236  Sarasota, Florida 34	Name and	Title:	Name and Title	e: <u> </u>
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name: Address:  Christopher D. Westers Address:  E342 Hunsingwood Cl Barascia, Florida 34235  EFFECTIVE DATE  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is: Name: Name: Name: National Street, Cutter 750  Sarascia, Florida 34236  Isouring been named as registered agent to accept service of process for the above stated corporation at the place designated his certificate, am famillar with and accept the appointment as registered agent and agree to act in this capacity  Required Signature/Registered Agent  Submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in	Address:		Address:	
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name: Address:  Sold Huntingwood Cl Barascia, Florida 34235  EFFECTIVE DATE  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name: Name: Name: Nataya Sochribova, Esq. Address:  1980 Main Sires, Cute 750  Sarascia, Florida 34236  Isving been named as registered agent to accept service of process for the above stated corporation at the place designated his certificate, am famillar with and accept the appointment as registered agent and agree to act in this capacity  Required Signature/Registered Agent  Submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in				
he name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name: Christopher D. Westers  Address: 5342 Hunsingwood Cl  Barasota, Florida 34235  RTICLE VII INCORPORATOR  he name and address of the Incorporator is:  Name: Name: Nameya Sockhistora, Esq.  Address: 1990 Main Street, Outer 750  Sarasota, Florida 34236  Required Signature/Registered Agent  Submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in			<del></del>	Shristopher D. Weters
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name:  Christopher D. Winters  S342 Hunsingwood Ci  Barasota, Florida 34233  EFFECTIVE DATE  OI/OI/2012  Required Signature/Registered Agent  Submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in	RTICLE VI	REGISTERED AGENT		
Name: Address:  Barasota, Florida 34235  EFFECTIVE DATE  Birasota, Florida 34235  EFFECTIVE DATE  DI/01/2012  Required Signature/Registered Agent  Submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in			stable) of the registered ago	ent is:
Barasota, Florida 34235  RTICLE VII INCORPORATOR  the name and address of the Incorporator is:  Name:  Name:  National Street, Cutte 750  Sarasota, Florida 34236  Sarasota				
RTICLE VII INCORPORATOR  the name and address of the Incorporator is:  Name:  Natalya Sortintova, Esq.  Address:  1990 Main Street, State 750  Sarasota, Florida 34236   Iaving been named as registered agent to accept Service of process for the above stated corporation at the place designated as certificate, I am familiar with drai accept the appointment as registered agent and agree to act in this capacity  Required Signature/Registered Agent  Submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in	Address:	5342 Huntingwood Ct		
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he name and address of the Incorporator is:  Name: Name: Name: Address:  1980 Main Street, 6.48e 750  Sarasota, Florida 34236  Javing been named as registered agent to accept service of process for the above stated corporation at the place designated his certificate, am familiar with drid accept the appointment as registered agent and agree to act in this capacity  Required Signature/Registered Agent  Submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in	RTICLE VII	INCORPORATOR	ě	01/01/2012
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