

P/2000053841

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

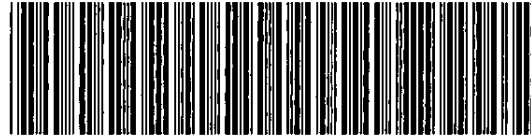
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05/29/12--01019--011 \*\*35.00

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12 JUN 13 AM 11:21  
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TALLAHASSEE, FLORIDA  
W12-2111  
26858

D. BRUCE

JUN 14 2012

EXAMINER





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 6, 2012

DAVID A DEFIBAUGH  
20721 COCONUT DR  
ESTRO, FL 33928

SUBJECT: FLORIDA SOUVENIR WHOLESALE, INC.  
Ref. Number: W12000026858

We have received your document for FLORIDA SOUVENIR WHOLESALE, INC. and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 812A00016046

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
12 MAY 31 PM 2:00

May 15, 2012

DAVID A DEFIBAUGH  
20721 COCONUT DR  
ESTRO, FL 33928

SUBJECT: FLORIDA SOUVENIR WHOLESALE, INC.  
Ref. Number: W12000026858

We have received your document for FLORIDA SOUVENIR WHOLESALE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of 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) 245-6052.

Tim Burch  
Regulatory Specialist II  
New Filing Section

Letter Number: 212A0001436

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12 JUN 13 AM 11:21  
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TALLAHASSEE, FLORIDA



COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Florida Souvenir Wholesale LLC  
Name of Florida Limited Liability Company

The enclosed Certificate of Conversion and fee(s) are submitted to convert a Florida Limited Liability Company" into an "Other Business Entity" in accordance with s.608.4403, F.S.

Please return all correspondence concerning this matter to:

David Defibaugh  
Contact Person

Florida Souvenir Wholesale Inc.  
Firm/Company

20721 Coconut Dr.  
Address

Estero, FL 33928  
City, State and Zip Code

Aldern wholesale @ Comcast.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dave Defibaugh at ( 239 ) 292-2144  
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee and Certificate of Status ☐ \$55.00 Filing Fee and Certified Copy ☐ \$60.00 Filing Fee, 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

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12 JUN 13 AM 11:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**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:

Florida Souvenir Wholesale LLC

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)

on 09/28/2007  
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**:

Florida Souvenir Wholesale Inc

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.



Signed this 17<sup>th</sup> day of JUNE, 2012.

**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: \_\_\_\_\_

Printed Name: David A. Deshaugh Title: President

**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: \_\_\_\_\_

Printed Name: David A. Deshaugh Title: President

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

12 JUN 13 AM 11:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**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 607 and/or Chapter 621, F.S. (Profit)

## ARTICLE I NAME

The name of the corporation shall be: Florida Souvenir Wholesale INC.  
DBA Alden Wholesale

## ARTICLE II PRINCIPAL OFFICE

Principal street address

20721 Coconut Dr.  
Estero, FL 33928

Mailing address, if different is:

20721 Coconut Dr.  
Estero, FL 33921

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

operate Souvenir Wholesale Business  
And to convert LLC to Corporation

## ARTICLE IV SHARES

The number of shares of stock is: 1,000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DAVID A. DeFibaugh President  
Address: 20721 Coconut Dr.  
Estero FL 33928

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

## ARTICLE VI REGISTERED AGENT

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

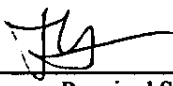
Name: DAVID A. DeFibaugh  
Address: 20721 Coconut Dr.  
Estero, FL

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DAVID A. DeFibaugh  
Address: 20721 Coconut Dr.  
Estero, FL 33928

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

5-11-12

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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

5-11-12

Date

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12 JUN 13 AM 11:21  
CLERK OF STATE  
TALLAHASSEE, FLORIDA