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P/BW08T303

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

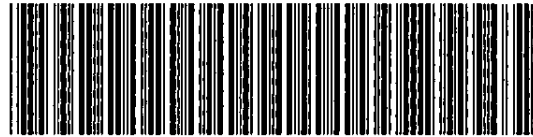
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status ☒

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10/22/13--01007--014 **113.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 OCT 22 AM 11:54

CWS

10-24-13

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: **PAUL ACHING ENTERPRISES, 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:

CHRISTOPHER RUFFES

Contact Person

BEACON FINANCIAL SERVICES, LLC

Firm/Company

2506 COMMERCE AVE

Address

SPRING HILL, FL 34609

City, State and Zip Code

beacon_financial_services@live.com

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

For further information concerning this matter, please call:

CHRIS RUFFES

Name of Contact Person

at (**352**) **684-1940**

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:

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

MAILING ADDRESS:

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

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

13 OCT 22 11:54
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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:

PAUL ACHING ENTERPRISES, LLC - L/1-6000-78518

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 **07/07/2011**
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**:

PAUL ACHING ENTERPRISES, 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.)

Signed this 18th day of October, 20 13.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or if Directors or Officers have not been selected, an Incorporator: Paul Aching 10/18/13

Printed Name: PAUL ACHING

Title: INCORPORATOR

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

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)

SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 OCT 23 AM 11:54

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: PAUL ACHING ENTERPRISES INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

9383 BELVEDERE ST
SPRING HILL, FL 34609

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

COMPANY REORGANIZATION FROM A SOLE MEMBER STATUS
ALLOWING ADDITIONAL SHAREHOLDERS ORGANIZED AS A
SUBCHAPTER S CORPORATION.

ARTICLE IV SHARES

The number of shares of stock is: 200 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PAUL ACHING-PRESIDENT

Name and Title: SHIREEN WEINMAN- VICE PRESIDENT

Address: 9383 BELVEDERE ST
SPRING HILL, FL 34608

Address: 9383 BELVEDERE ST
SPRING HILL, FL 34608

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: PAUL ACHING

Address: 9383 BELVEDERE ST
SPRING HILL, FL 34608

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: PAUL ACHING
Address: 9383 BELVEDERE ST
SPRING HILL, FL 34609

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

Paul Aching
Required Signature/Registered Agent

10/18/13
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.

Paul Aching
Required Signature/Incorporator

10/18/13
Date