

P/400037738

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

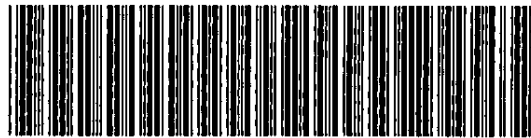
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
DIVISION OF INFORMATION  
14 APR 28 PM 12:40

*[Handwritten signature]*

**COVER LETTER**

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** DEALS ON WHEELS OF THE PALM BEACHES, 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:

**JEFFREY L SHUMAN**

Contact Person

Firm/Company

**3292 SHAWNEE AVE STE 9**

Address

**WEST PALM BEACH, FL 33409**

City, State and Zip Code

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

For further information concerning this matter, please call:

**JEFFREY L SHUMAN** at **(561) 886-8477**

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:**

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

**MAILING ADDRESS:**

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

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000090985

Entity Name: DEALS ON WHEELS OF THE PALM BEACHES LLC

Current Principal Place of Business:

3292 SHAWNEE AVE

9

WEST PALM BEACH, FL 33409

Current Mailing Address:

3292 SHAWNEE AVE

9

WEST PALM BEACH, FL 33409

FEI Number: 27-3351293

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHUMAN, JEFFREY

3292 SHANWEE AVE

9

WEST PALM BEACH, FL 33409 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR

Name SHUMAN, MARVIN

Address 3292 SHAWNEE AVE #9

City-State-Zip: WEST PALM BEACH FL 33409

Title MGRM

Name SHUMAN, JEFFREY

Address 3292 SHAWNEE AVE #9

City-State-Zip: WEST PALM BEACH FL 33409

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEFFREY SHUMAN

MGR

04/26/2014



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 17, 2014

JEFFREY L. SHUMAN  
3292 SHAWNEE AVENUE, STE 9  
WEST PALM BEACH, FL 33409



SUBJECT: DEALS ON WHEELS OF THE PALM BEACES, INC.  
Ref. Number: W14000024603

RECEIVED  
14 APR 28 AM 11:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for DEALS ON WHEELS OF THE PALM BEACES, 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):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

Sylvia Gilbert  
Regulatory Specialist II  
New Filing Section

Letter Number: 314A00008320

**Certificate of Conversion**

For

**"Other Business Entity"**

Into

**Florida Profit Corporation**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

14 APR 28 PM 12:40

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:

**DEALS ON WHEELS OF THE PALM BEACHES 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 **AUGUST 26, 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:

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

**DEALS ON WHEELS OF THE PALM BEACHES, 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 28<sup>th</sup> day of April, 2014.

**Required Signature for Florida Profit Corporation:**

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

Printed Name: JEFFREY L SHUMAN Title: PRESIDENT

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

Signature: [Signature]  
Printed Name: MARVIN SHUMAN Title: MANAGING MEMBER

Signature: [Signature]  
Printed Name: JEFFREY SHUMAN Title: MEMBER

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)

**ARTICLES OF INCORPORATION**

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 APR 28 PM 12:40

**ARTICLE I NAME**

The name of the corporation shall be: DEALS ON WHEELS OF THE PALM BEACHES, INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

3292 SHAWNEE AVE STE 9  
WEST PALM BEACH, FL 33409

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY LAWFUL PURPOSE.

**ARTICLE IV SHARES** 10,000

The number of shares of stock is:

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: JEFFREY L SHUMAN, PRES

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

Address: 3292 SHAWNEE AVE STE 9  
WEST PALM BEACH, FL

Address: \_\_\_\_\_

Name and Title: MARVIN SHUMAN, VP

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

Address: 3292 SHAWNEE AVE STE 9  
WEST PALM BEACH, FL 33409

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: JEFFREY SHUMAN

Address: 3292 SHAWNEE AVE STE 9  
WEST PALM BEACH, FL 33409

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: JEFFREY L SHUMAN

Address: 3292 SHAWNEE AVE STE 9  
WEST PALM BEACH, FL 33409


\*\*\*\*\*

*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

4/18/14  
\_\_\_\_\_  
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

4/18/14  
\_\_\_\_\_  
Date