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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR 2 - 2015

S. GILBERT

P15-4452

**COVER LETTER**

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** PAm Property Investments Corp  
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:

Diana Tartaglia  
Contact Person

Guardian Law  
Firm/Company

770 E. Main St. Ste. 242  
Address

Lehi, UT 84043  
City, State and Zip Code

diana@guardianlaw.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Diana Tartaglia at ( 877 ) 313-1043  
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

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000157370

**Entity Name:** PAM PROPERTY INVESTMENTS, LLC

**Current Principal Place of Business:**

3030 N ROCKY POINT DR STE 150A  
TAMPA, FL 33607

**Current Mailing Address:**

6900 DANIELS PKWY STE 29-140  
FT MYERS, FL 33912

**FEI Number:** 37-1755393

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NORTHWEST REGISTERED AGENTS LLC  
3030 N ROCKY POINT DR STE 150A  
TAMPA, FL 33607 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            AMBR  
Name            HOWARD, LANETTE M  
Address        6900 DANIELS PKWY SUITE 29-140  
City-State-Zip: FT MYERS FL 33912

Title            MGR  
Name            HOWARD, LANETTE M  
Address        6900 DANIELS PKWY SUITE 29-140  
City-State-Zip: FT MYERS FL 33912

*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:** LANETTE M HOWARD

**MANAGER**

**02/11/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date

**Certificate of Conversion**  
For  
**"Other Business Entity"**  
Into  
**Florida Profit Corporation**

**FILED**  
**15 FEB 24 AM 11:22**  
CLERK OF STATE  
TALLAHASSEE, 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:

PAm Property Investments, LLC - 1/14-000-157370  
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 March 20, 2014  
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:**

PAm Property Investments Corp  
Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: effective upon filing  
(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 20 day of January, 20 15.

**Required Signature for Florida Profit Corporation:**

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

Printed Name: Lanette M. Howard Title: Chairman / Director

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

Signature: Lanette M. Howard  
Printed Name: Lanette M. Howard Title: Manager

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)

ARTICLES OF INCORPORATION

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

FILED

FEB 24 AM 11:22

ARTICLE I NAME

The name of the corporation shall be: PAM Property Investments

CLERK OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

3030 N. Rocky Point Dr., Ste 150A  
Tampa, FL 33607

6900 Daniels Parkway, Ste. 29-140  
Fort Myers, FL 33912

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Own, operate and manage real estate and to do  
any lawful act or thing for which corporations may  
be organized under the laws of Florida

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lorette M. Howard, Chairman/Director Name and Title:

Address: 13716 Brynwood Ln Address:  
Fort Myers, FL 33912

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: North West Registered Agent, LLC

Address: 3030 N. Rocky Point Dr., Ste. 150A  
Tampa, FL 33607  
33607

(cont.)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_ *RIA* \_\_\_\_\_  
\_\_\_\_\_ \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Northwest Registered Agent LLC  
Address: 3030 N. Rocky Point Dr, STE 150A  
Tampa, FL 33607

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Lanette M. Howard  
Address: 6900 Daniels Parkway, Ste. 29-140  
Fort Myers, FL 33912

*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*

*[Signature]*

Dan Keen - Manager

Required Signature/Registered Agent

1-21-2015  
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.*

*[Signature]*

Required Signature/Incorporator

01/21/2015  
Date