

P/5000067571

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 AUG 12 PM 2:39

*conversion*

AUG 12 2015

T CANNON



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 24, 2015

RICARDO E BERMEDEZ  
ARC PRIVATE PROVIDER SERVICES, INC.  
7414 SW 48TH STREET  
MIAMI, FL 33155

SUBJECT: ARC PRIVATE PROVIDER SERVICES LLC  
Ref. Number: L15000077050

We have received your document for ARC PRIVATE PROVIDER SERVICES LLC and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

If we have had no written response within 60 days of this letter, we will consider your document abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

New Filing Section.

Letter Number: 215A00015627

**COVER LETTER**

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** ARC Private Provider Services, 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:

Ricardo E. Bermudez

Contact Person

ARC Private Provider Services, Inc.

Firm/Company

7414 SW 48th Street

Address

Miami, FL 33155

City, State and Zip Code

rick@arcprivateprovider.com

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

For further information concerning this matter, please call:

Ricardo E. Bermudez

at ( 305 )

989-0311

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

<input type="checkbox"/> \$105.00 Filing Fees	<input type="checkbox"/> \$113.75 Filing Fees and Certificate of Status	<input type="checkbox"/> \$113.75 Filing Fees and Certified Copy	<input checked="" type="checkbox"/> \$122.50 Filing Fees, Certified Copy, and Certificate of Status
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**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

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15 AUG 12

**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:

ARC Private Provider Services 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 May 1, 2015  
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**:

ARC Private Provider Services, 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.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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Signed this 31st day of July, 2015

**Required Signature for Florida Profit Corporation:**

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Ricardo E. Bermudez  
 Printed Name: Ricardo E. Bermudez Title: President

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

Signature: Ricardo E. Bermudez  
 Printed Name: Ricardo E. Bermudez Title: President

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)

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**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: ARC Private Provider Services, Inc.**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

Principal street address  
7414 SW 48th StreetMiami, FL 33155Mailing address, if different is:P.O. Box 559043Miami, FL 33255-9043**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide building plans reviews and construction inspections services.

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TALLAHASSEE, FLORIDA**ARTICLE IV SHARES**

The number of shares of stock is:

1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Ricardo E. Bermudez, President

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

Address: 7414 SW 48th Street

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

Miami, FL 33155Name and Title: Jose Ramos, Vice-President

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

Address: 8837 NW 149 Ter

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

Miami Lakes, FL 33018

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: Ricardo E. Bermudez  
Address: 7414 SW 48th Street  
Miami, FL 33155

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Ricardo E. Bermudez  
Address: 7414 SW 48 Street  
Miami, FL 33155

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\*\*\*\*\*  
*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*

Ricardo E. Bermudez  
Required Signature/Registered Agent

07/31/2015

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.*

Ricardo E. Bermudez  
Required Signature/Incorporator

07/31/2015

Date