

P17000002877

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

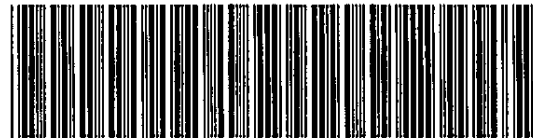
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



400293671054

01/10/17--01014--030 \*\*122.50

FILED

2017 JAN 10 PM 5:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

V HERRING  
JAN 11 2017

COVER LETTER

TO: Charter Section  
Division of Corporations

SUBJECT: ZURMONT SOLUTIONS, INC.  
Name of Resulting Florida Profit Corporation

(was  
LLC)

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:

Suzanne Andrews  
Contact Person

ZURMONT SOLUTIONS, INC.  
Firm/Company

651 Juneberry Court  
Address

Boca Raton, FL 33486  
City, State and Zip Code

SANDREWS@MANAGEDCARE.SOL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SUZANNE ANDREWS at ( 619 ) 602 2203  
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

Thank You for  
your service,  
Suzanne  
Andrews

**Certificate of Conversion**

For

**"Other Business Entity"**

Into

**Florida Profit Corporation**

FILED

2017 JAN 10 PM 5:08

SECRETARY 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:

ZURMONT SOLUTIONS, LLC

Enter Name of Other Business Entity

2. The "Other Business Entity" is a

LLC

(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

12-30-2016

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**:

ZURMONT SOLUTIONS, INC.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: NA

(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.

Signed this 5<sup>th</sup> day of January, 2017.

**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: SUZANNE ANDREWS CEO

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

Signature: Suzanne Andrews

Printed Name: SUZANNE ANDREWS Title: Managing Member

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)

FILED  
2017 JAN 10 PM 5:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: 2 URMONT SOLUTIONS, INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

651 Juneberry Court  
Boca Raton, FL 33486

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The purpose of the company is to  
CONDUCT ANY LAWFUL business in the  
STATE of FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is:

100 (one hundred)

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

Name and Title: SHIZANNE ANDREWS, CEO

Name and Title:

Address: 651 Juneberry Ct  
Boca Raton, FL 33486

Address:

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

2017 JAN 10 PM 5:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**ARTICLE VI REGISTERED AGENT**

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

FILED

Name: Joseph Wilhelm  
Address: 1051 Juneberry Ct  
Boca Raton, FL 33486

2017 JAN 10 PM 5:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: SUZANNE ANDREWS  
Address: 1051 JUNE BERRY CT.  
BOCA RATON, FL 33486

\*\*\*\*\*

*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*

Joseph Wilhelm  
Required Signature/Registered Agent

1-5-17  
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.*

Suzanne Andrews  
Required Signature/Incorporator

1-5-17  
Date