P17000025869

(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:				



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SEURETARY OF STATE

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COVER LETTER

TO:	Charter Section Division of Cor					
SUBJ	PATRIOT (CHOICE INC				
0020		Name of	Resulting Florid	la Profit	Corporation	•
		e of Conversion, Articles Profit Corporation" in ac			ees are submitted to convert an "Othe 15, F.S.	r Business
Please	return all corresp	oondence concerning this	s matter to:			
CURT	IS LUCKETT					•
		Contact Person				
Pa	TRIOT (CHO'CE IN	C			
		Firm/Company		_		
100 E.	CAMPUS VIEW	BLVD, STE 250				
		Address	· · · · · · · · · · · · · · · · · · ·			
COLU	MBUS, OH 43235	;				
		City, State and Zip Code	2	- .		
sovere	ignmissions@gma	il.com				
<u>I</u>	E-mail address: (t	o be used for future annu	al report notific	ation)		
For fu	rther information	concerning this matter,	please call:			
CURT	IS LUCKETT		_at (813-2	935	
	Name of Co	ontact Person	Area	Code and	Daytime Telephone Number	
Enclos	sed is a check for	the following amount:				
二\$ 10	5.00 Filing Fees	☐\$113.75 Filing Fees and Certificate of Status	□\$113.75 Fili and Certified (■\$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			

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.

business rainty into a Fiorida Profit Curporation in accordance with s. 607.1115, Fiorida Statu	ies.	
1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Col	nversion is:	
PATRIOT CHOICE LLC 117 - 44902		
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 PLORIDA (Enter state, or if a non-U.S. entity, the name of the country)		
FEB 24TH, 2017		
Enter date "Other Business Entity" was first organized, formed or incorporate	d	
 If the jurisdiction of the "Other Business Entity" was changed, the state or country under the law organized, formed or incorporated: 	s of which it is	now
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> PATRIOT CHOICE INC	<u>n:</u>	
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 Department of State; AND 2) must be the same as the effective date listed in the attached Arti if an effective date is listed therein.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the listed as the document's effective date on the Department of State's records.	cles of Incorp	oration
Page 1 of 2	17 MAR 22 SECRE VARY FALLAHASSE	<u></u>
	PH L	im C7

Signed thisday of	, 20	
Required Signature for Florida Profit Corporation	<u>.</u>	
Signature of Chairman, Vice Chairman, Director, Offi	icer, or, if Directors or Officers have not	been selected, an
Printed Name: CURTIS LUCKETT Title: SECR	ETARY	
Required Signature(s) on behalf of Other Business	Entity: [See below for required signatu	ire(s).]
Signature: Out Lutter		···········
Printed Name: CURTIS LUCKETT	Title: PRESIDENT	
Signature:		
Printed Name: GEOFMEY SHEARER	Title: VICE-PRESIDENT	
Signature: Out Lufting	· · · · · · · · · · · · · · · · · · ·	
Printed Name: CURTIS LUCKETT	Title:	
Printed Name: GEOFFREY SHEARER	Title:	
Signature: Out Sulfate	· · · · · · · · · · · · · · · · · · ·	
Printed Name:	Title:	
Signature:		
Printed Name: GEOFFMEY SHEARER	Title: DIRECTOR	<u></u>
If Florida General Partnership or Limited Liability Signature of one General Partner.	y Partnership;	17 JAL
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	<u> Limited Partnership:</u>	HAR 22 CHE JAR APASS
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		
All others: Signature of an authorized person.		LORIDA
Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	

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

ARTICLE I NAME PATRIOT CHOICE I	NC			
The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:				
Principal street address 223 DOLPHIN COVE CT	100 E. C	Mailing address, if different is: CAMPUS VIEW BLVD, STE 250		
BONITA SPRINGS, FL 34134		1BUS, OH 43235		
ARTICLE III PURPOSE The purpose for which the corporation is organized is: BUSINESS CONSULTING				
-		17 MAR 22 SALUAHASS		
ARTICLE IV SHARES The number of shares of stock is:		PA 4:		
ARTICLE V INITIAL OFFICERS AND/OR DI	RECTORS	ORIU DRIU		
Name and Title: CURTIS LUCKETT, President		GEOFFREY SHEARER, Vice-President		
Address: 100 E. CAMPUS VIEW BLVD, STE 250	_ Address:	100 E. CAMPUS VIEW BLVD, STE 250		
COLUMBUS, OH 43235		COLUMBUS, OH 43235		
Name and Title:	_ Name and Title	GEOFFREY SHEARER, Treasurer		
Address: 100 E. CAMPUS VIEW BLVD, STE 250	_ Address:	100 E. CAMPUS VIEW BLVD, STE 250		
COLUMBUS, OH 43235		COLUMBUS, OH 43235		
Name and Title:	Name and Title	GEOFFREY SHEARER, Director		
Address: 100 E. CAMPUS VIEW BLVD, STE 250	Address:	100 E. CAMPUS VIEW BLVD, STE 250		
COLUMBUS, OH 43235	_	COLUMBUS, OH 43235		

ARTICL	E VI <u>REGISTERED AGENT</u>			
The name	and Florida street address (P.O. Box NOT acceptable	e) of the registered agent is:	•	
Name:	ROGER MILLER			
Address:	223 DOLPHIN COVE CT			
	BONITA SPRINGS, FL 34134	·		
ARTICL The name	E VII INCORPORATOR and address of the Incorporator is:			
Name:	CUETIS LUCKETT			
Address:	100 E. CAMPUS VEW BLUD STE 250			
	COLUMBUS, OH 43735	. *		
******** Having be	**************************************	**************************************	nce designated in city	
	sa W	03-06-2017		
	Required Signature/Registered Agent	Date		
	this abcument and affirm that the facts stated herein of the Department of State constitutes a third degree j		n submitted in a	
S	Out Auto	03-06-17		
	Paguired Signatura/Incorporator	Date		

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SEURE IAK) OF STATE
TALLAHASSEE, FLORIDA