P1700030349

(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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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 10, 2017

JACKIE JONES 3729 S LECANTO HWY LECANTO, FL 34462

SUBJECT: PEGASOS PERSONAL GROWTH CORP

Ref. Number: W17000020352

We have received your document for PEGASOS PERSONAL GROWTH CORP and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Article 1 not complete.,

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.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 117A00004649

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-www.sunbiz.org

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	,	COVER LETTER	
TO: Charter Section			
Division of Corp	orations	,	,
SUBJECT:	Para la	Coreworth	Con
SUBJECT:	Name of	Resulting Florida Profit	Corporation
The enclosed Certificate Entity" into a "Florida P			ces are submitted to convert an "Other Busine 15, F.S.
Please return all correspo	ondence concerning this	matter to:	
TACK	- Johes		
	Contact Person		
Leus, 3000	Mr. K. TINS		
Leys, Jong	Firm/Company		
3729 52	ecido Huy		
	Address		
<i></i>	1		
1-leanto	ity, State and Zip Code	62	
X	City, State and Zip Code	2	
Jacks P. Le	ME UDAKU MAA	ICTING COM	
TACKIE E Le E-mail address: (to	be used for future annu	ial report notification)	
For further information of	concerning this matter	nlagea call:	
JACKIC			20 0/52
Name of Cor	ntact Person	Area Code and	1 Daytime Telephone Number
Enclosed is a check for t	he following amount:		
S105.00 Filing Fees	□S113.75 Filing Fees	□\$113.75 Filing Fees	□\$122.50 Filing Fees,
	and Certificate of	and Certified Copy	Certified Copy, and
	Status		Certificate of Status
STREET ADDRESS:		MAII	JNG ADDRESS:
New Filings Section			ilings Section
Division of Corporations	S		on of Corporations
Clifton Building			3ox 6327
2661 Executive Center (Circle	Tallah	assee, FL 32314

Tallahassee, FL 32301

Certificate of Conversion For

"Other Business Entity"

Into

Florida Profit Corporation

This Certificate of Conversion <u>and attached Articles of Incorporation</u> 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:
Enter Name of Other Business Entity
Enter Name of Other Business Entity
2. The "Other Business Entity" is a <u>General Partners Lyo</u> (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
(Enter state, or if a non-U.S. entity, the name of the country)
on
Enter date "Other Business Entity" was first organized, formed or incorporated
organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> : Cog Aso S Poisson C Composition Enter Name of Florida Profit Corporation

Page 1 of 2

17 KEP 30 AH 8: 46

Signed t	his 12+7 day of Feest wary	, 20	
Require	ed Signature for Florida Profit Corporation:		
Signatur Incorpot Printed 1	re of Chairman, Vice Chairman, Director Office rator: C Name: Face Aco Car San Title: Co	er, or, if Directors or Officers have not been	selected, an
	ed Signature(s) on behalf of Other Business E	ntity: [See below for required signature(s)	F.
	ro: NAU AUL		
Printed :	Name: Pal AW Plockhout	Title: Gervine PARTHER	
Signatu	re:		
Printed	Name:	Title:	
Signatu	re:		
Printed	Name:	Title:	
Signatu	re:		
Printed	Name:	Title:	
Signatu	re:		
Printed	Name:	Title:	
Signatu	re:		
Printed	Name:	_ Title:	
	ida General Partnership or Limited Liability ire of one General Partner.	<u>Partnership:</u>	
	ida Limited Partnership or Limited Liability ires of <u>ALL</u> General Partners.	Limited Partnership:	
If Flori Signatu	ida Limited Liability Company: ure of a Member or Authorized Representative.		
All oth Signatu	ers: are of an authorized person.		
Fees:	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)

The name of the corporation shall be: legasos	ersonol Orowill Corp		
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:			
Principal street address	Mailing address, if different is:		
3729 5 Lecrote they			
1995 SLECANDE Hay Leenate El 34461			
ARTICLE III PURPOSE The purpose for which the corporation is organized is:			
Business for Profit			
		•	Ţ,
			17 HAR (
	,	<u> </u>	30 -
			A. 89
			9+ :8
ARTICLE IV SHARES The number of shares of stock is: / coco			
ARTICLE V INITIAL OFFICERS AND/OR DIRE			
Name and Title: Park ALU Flockhat - Colle			
Address: 3723 W BNNN VI Th		····	
Bevery 14/15 121 3.1461			
Name and Title: LINDA PARelli - 6 Press	Name and Title:		
Address: 7110 Hwy 160W	Address:		
PAGOSA SPSS, CO 81147			
Name and Title:	Name and Title:		
Address:	Address:		

ARTICLE VI REGISTERED AGENT
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:
Name: Paul Aw Flork hart
Address: 5723 W BONDAVA D
Benerty 14/15, 1=1 34465
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:
Name: fort the Florithmit
Address: 5723 W GONAND M
Bevery 14/15 1-1 34465

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 Date
Required Signature/Registered Agent 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 \$.817.155, F.S.
2-12-17
Required Signature/Incorporator Date