

P17000055152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

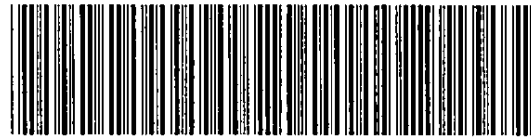
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/08/17--01013--029 **122.50

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17 JUN 26 AM 9:09
W17-148737

T. BURCH

JUN 27 2017

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Precision Stamping Products, 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:

Conrad Willkomm, Esq.

Contact Person

Law Office of Conrad Willkomm, Esq.

Firm/Company

3201 Tamiami Trail North, 2nd Floor

Address

Naples, FL 34103

City, State and Zip Code

conrad@swfloridalaw.com

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

For further information concerning this matter, please call:

Conrad Willkomm, Esq.

at (239) 262-5303

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 |
|---|---|---|---|

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 9, 2017

CONRAD WILLKOMM, ESQ
3201 TAMiami TRAIL NORTH 2ND FLOOR
NAPLES, FL 34103

SUBJECT: PRECISION STAMPING PRODUCTS, INC.
Ref. Number: W17000048733

We have received your document for PRECISION STAMPING PRODUCTS, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return 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.

Tim Burch
Regulatory Specialist III

Letter Number: 117A00011685

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:
Precision Stamping Products, Inc.

Enter Name of Other Business Entity

2. The "Other Business Entity" is a corporation
(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 Illinois
(Enter state, or if a non-U.S. entity, the name of the country)

on March 2, 2000
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:**
Precision Stamping Products, 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.

Signed this 19 day of May, 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: [Signature]

Printed Name: John J. Sharkey Title: President & Director

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

Signature: [Signature]

Printed Name: John J. Sharkey Title: President & Director

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)

ARTICLE I NAME

The name of the corporation shall be: Precision Stamping Products, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

3730 Montreux Lane, Unit 204

Naples, Florida 34114

Mailing address, if different is:

3730 Montreux Lane, Unit 204

Naples, Florida 34114

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business purposes.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: John J. Sharkey a/k/a Jack Sharkey, P & D

Address: 3730 Montreux Lane, Unit 204

Naples, Florida 34114

Name and Title: Geraldine Sharkey, S & D

Address: 3730 Montreux Lane, Unit 204

Naples, Florida 34114

Name and Title: Dennis J. Sharkey, T & D

Address: 1965 Cool Creek Drive

St. Charles, Illinois 60174

Name and Title: Dean C. Sharkey, VP & D

Address: 3903 Knighthawk Court

Naperville, Illinois 60564

Name and Title: Michael C. Sharkey, VP & D

Address: 40W379 Laura Ingalls Wilder Road

St. Charles, Illinois 60175

Name and Title:

Address:

ARTICLE VI REGISTERED AGENT

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

Name: Law Office of Conrad Willkomm, P.A.
Address: 3201 Tamiami Trail North, 2nd Floor
Naples, FL 34103

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: John J. Sharkey
Address: 3730 Montreux Lane, Unit 204
Naples, Florida 34114

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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

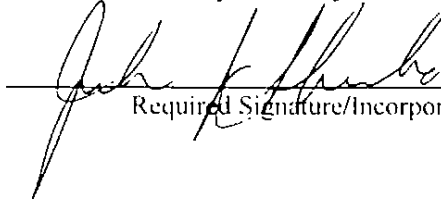


Required Signature/Registered Agent

5/19/17

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.



Required Signature/Incorporator

5/19/17

Date