

P18000047749

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

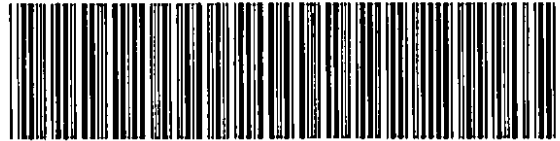
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700312765077

05/03/18--01019--007 **105.00

FILED

18 MAY 24 AM 9:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 25 2018

T SCHROEDER

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Performance Transformation, 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:

Terrance Murray
Contact Person

Performance Transformation
Firm/Company

5090 Central Sarasota Parkway #303
Address

Sarasota, FL 34238
City, State and Zip Code

tmurray@performtransform.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Terrance Murray at (828) 808-2955
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

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:

Performance Transformation, LLC 608-576554
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 June 11, 2008
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:

Performance Transformation, Inc.
Enter Name of Florida Profit Corporation

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

(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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.

FILED
18 MAY 24 AM 9:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signed this 30 day of April, 2018

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Terrance Murray

Printed Name: Terrance Murray Title: Managing Partner For Chief Executive Officer

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

Signature: _____

Printed Name: Sarah Murray Title: Secretary & Treasurer

Signature: SMurray

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
18 MAY 24 AM 9:12
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: Performance Transformation, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

5090 Central Sarasota Parkway
#303

Mailing address, if different is:

Sarasota, FL 34238

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide strategic services to medical device
companies.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: TERRANCE MURRAY, CEO Name and Title: _____

Address: 5090 Central Sarasota Pkwy #303 Address: _____

SARASOTA, FL 34238

Name and Title: Sarah Murray, Treasurer Name and Title: _____

Address: 5090 Central Sarasota Pkwy #303 Address: _____

SARASOTA, FL 34238

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

18 MAY 24 AM 9:12
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:

Name: TERRANCE MURRAY
Address: 5090 Central Sarasota Parkway #303
Sarasota, FL 34238

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: TERRANCE MURRAY
Address: 5090 Central Sarasota Parkway #303
Sarasota, FL 34238

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

Terrance Murray
Required Signature/Registered Agent

4/30/2018
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.

Terrance Murray
Required Signature/Incorporator

4/30/2018
Date

FILED
18 MAY 24 AM 9:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA