P190000035104

(Requestor's Name)	_		
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT	MAIL		
(Business Entity Nam	e)		
(Document Number)			
Certified Copies Certificates	of Status		
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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 18, 2019

SHAUNA MCELHENNY 10 HACIENDA WAY ST AUGUSTINE, FL 32095

SUBJECT: PM BIOSOLUTIONS, INC.

Ref. Number: W19000009539

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

You failed to make the correction(s) requested in our previous letter.

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.

Keyna E Page Regulatory Specialist II

10 MAR 25 AN 8

Letter Number: 719A00003424



January 30, 2019

SHAUNA MCELHENNY 10 HACIENDA WAY ST AUGUSTINE, FL 32095

SUBJECT: PM BIOSOLUTIONS, INC.

Ref. Number: W19000009539

We have received your document for PM BIOSOLUTIONS, 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):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/

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.

Keyna E Page Regulatory Specialist II

Letter Number: 119A00002142

.. COVÉR LETTER

TO: Charter Section Division of Corporations
SUBJECT: PM Biosolutions, 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:
Shavna McElhenny Contact Person
PM Biosolutions Firm/Company
10 Hacienda Way Address
St. Augustine FL 32095 -City. State and Zip Code
Shauna pombiosolutions. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Shaving M. Elhenry at 1.858; 205-4729 Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$105.00 Filing Fees and Certificate of status □ \$113.75 Filing Fees and Certificate of Status □ \$113.75 Filing Fees and Certified Copy Certificate of Status
STREET ADDRESS:MAILING ADDRESS:New Filings SectionNew Filings SectionDivision of CorporationsDivision of CorporationsClifton BuildingP. O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

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:
PM Biosolutions, LLC
Enter Name of Other Business Entity
2. The "Other Business Entity" is a
first organized, formed or incorporated under the laws of FLOR(D4 (Enter state, or if a non-U.S. entity, the name of the country)
on 01 May 2017
on Old May 2017 Enter date "Other Business Entity" was first organized, formed or incorporated
 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: The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
PM Biosolution, 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.

Signed this 7th day of Januar Y	20	
Required Signature for Florida Profit Corporation	<u>n:</u>	
Signature of Chairman, Vice Chairman, Director, Off Incorporator: Shau & M & W & W Printed Name: Sinavna M Elbany Title: V	icer. or, if Directors or Officers have not	been selected, an
Required Signature(s) on behalf of Other Business	s Entity: [See below for required signatu	
Signature: Shacoa & MElling		
Signature: Shacua K. M. Elling Printed Name Shavna L. M. Elhenn	Y Tide: Vice President	
Signature:	/	
Printed Name:		
Signature:		 _
Printed Name:		
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
lf Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	tv Limited Partnership:	TO MAR
If Florida Limited Liability Company: Signature of a Member or Authorized Representative		MR 25
All others: Signature of an authorized person.		9 MAR 25 AM 8: 26
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: M Bioso L	utions,	Inc		
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:				
Principal street address 10 Hacienda Way		Mailing address, if different is: 10 Hacrenda Way St. Augustine FL 3		
10 Hacienda Way St. Augustine FL 32095	_ <u></u> _	+. Augusti	ne FL	<u>3</u> 2095
ARTICLE III PURPOSE The purpose for which the corporation is organized is:				
For Profit - cons	sulting			
				
				
ARTICLE IV SHARES The number of shares of stock is: [OC				
Name and Title: Shauna McElhenny	ECTORS	gident		
Address: 10 Hacienda Way	Address:	le:		
St Augustine FL32 Name and Title: Anna MElhana	095 Presider	u t		
Address: 10 Hacienda Way	Address:	le:		.0
St Augustine FL3 Name and Title:	2095			2
Address:	Name and Tit Address:	ic	10:26 0:58	
			•	-

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ARTICL	E VI REGISTERED AGENT		
The name	e and Florida street address (P.O. Box NOT acceptable)	of the registered agent is:	
	Shavna METhenny 10 Hacienda way St. Augustine Fi 32095		
	St. Augustine FL 32075		
	3		
ARTICL The name	E VII INCORPORATOR e and address of the Incorporator is:		
The <u>name</u>	CZI L. C. a. I		
Name:	Shauna MEthenny		
Address:	Shauna McElhenny 10 Hacienda Way St Augustine FL 32095		
	St Augustine FL 32095	- -	
******** Having be	**************************************	**************************************	d in
inis ceruji	icate, I am familiar with and accept the appointment as re \mathscr{U}_{C}	egistered agent and agree to act in this capacity	
	Required Signature/Registered Agent	1/7/19 Date	
I submit t document	this document and affirm that the facts stated herein are to the Department of State constitutes a third degree felo	true. I am aware that any false information submitted iony as provided for in s.817.155, F.S.	n a
_Sh	Required Signature/Incorporator	1/7/19 Date	
	<i>9</i>	1	

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