

P19 000078167

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

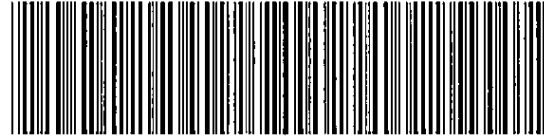
Certified Copies _____ Certificates of Status _____

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Office Use Only

OCT 18 2019

T. SCOTT



600335879286

08/16/19--01019---003 **105.00

19 OCT 17 PM 1:52

2019 OCT 17 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 10, 2019

PETER H CALFEE
1105 BAYWOOD DRIVE
VERO BEACH, FL 32963

SUBJECT: CALFEE FINANCIAL ADVISORS INC
Ref. Number: W19000078169

We have received your document for CALFEE FINANCIAL ADVISORS INC and your check(s) totaling \$105.00. 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 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: 619A00018616

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: CALFEE FINANCIAL ADVISORS 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:

PETER H. CALFEE

Contact Person

CALFEE FINANCIAL ADVISORS INC.

Firm/Company

1105 Baywood DR.

Address

Vero Beach Florida 32963

City, State and Zip Code

Pcalfee@Calfefinancial.com

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

For further information concerning this matter, please call:

Peter H. Calfee

Name of Contact Person

at (216) 401 8957

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

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: CALFEE FINANCIAL ADVISORS 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:

PETER H. CALFEE

Contact Person

CALFEE FINANCIAL ADVISORS INC.

Firm/Company

1105 Baywood DR.

Address

Vero Beach Florida 32963

City, State and Zip Code

Pcalfee@CalfeeFinancial.com

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

For further information concerning this matter, please call:

Peter H. Calfee

Name of Contact Person

at (216) 401 8957

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STREET ADDRESS:

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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:

CALFEE FINANCIAL ADVISORS INC.
Enter Name of Other Business Entity

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

on SEPT 18 1997 / legal - Orig Filing date 9/22/97
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**:

CALFEE FINANCIAL ADVISORS INC.
Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: N/A
(The effective date: Cannot be prior to not 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
2018 OCT 17 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signed this 8th day of AUGUST, 2019.

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: PETER H. CALFEE Title: President

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

Signature: [Signature]

Printed Name: PETER H. CALFEE Title: President

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: CALFEE FINANCIAL ADVISORS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

1105 Baywood DR

Vero Beach

Florida 32963

Mailing address, if different is:

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide General Consulting business advice TO
include Compensation and Benefit
Advice

ARTICLE IV SHARES

The number of shares of stock is: Max 850 425 Voting 425 non voting

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PETER H CALFEE POST CEO Name and Title: _____

Address: 1105 Baywood DR Address: _____
Vero Beach Florida 32963

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

FILED
2018 OCT 17 PM 1:07
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

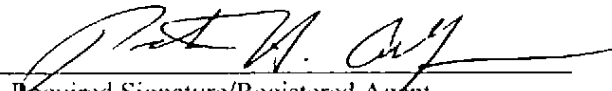
Name: CALFEE, PETER H.
Address: 1105 Baywood DR.
Vero Beach FL 32963

ARTICLE VII INCORPORATOR

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

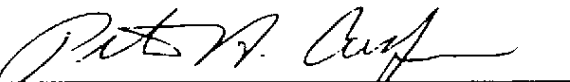
Name: CALFEE, PETER H.
Address: 1105 Baywood DR
Vero Beach FL 32963

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

AUGUST 8 2019
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

AUGUST 8 2019
Date