

PH 000 086 756

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

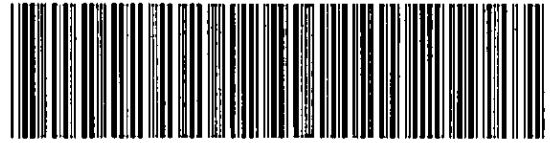
(Business Entry Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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NOV 29 2019 11:00 AM

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

D O'KEEFF  
NOV 29 2019

WP9-87369



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 27, 2019

PAUL LAMBERT  
PAUL ELWIN LAMBERT  
7840 TRAIL RUN LOOP  
NEW PORT RICHEY, FL 34653

SUBJECT: PAUL ELWIN LAMBERT PC  
Ref. Number: W19000087369

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for PAUL ELWIN LAMBERT PC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

- ✓ Please provide missing signatures in the Certificate of Conversion. Also, correct title for Required Signature for Florida Profit Corporation.
- ✓ The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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.

DANIEL L O'KEEFE  
Regulatory Specialist II

Letter Number: 119A00020009

**COVER LETTER**

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** Paul Elwin Lambert PC  
\_\_\_\_\_  
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:

Paul Lambert  
\_\_\_\_\_  
Contact Person

Paul Elwin Lambert  
\_\_\_\_\_  
Firm/Company

7840 Trail Run Loop  
\_\_\_\_\_  
Address

New Port Richey, FL 34653  
\_\_\_\_\_  
City, State and Zip Code

paulamb15445@gmail.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul Lambert at ( 801 ) 599 7547  
\_\_\_\_\_  
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:

Paul Elwin Lambert LLC

Enter Name of Other Business Entity

2. The "Other Business Entity" is a LLC  
(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 06 May 2019  
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:

Florida

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation**:

Paul Elwin Lambert ~~LLC~~ Professional Corporation

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: 10 Sept 2019.

**(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.

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DEPARTMENT OF STATE

Signed this 10 day of Sept, 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: Paul Lambert Title: managing member

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

Signature: [Signature]  
Printed Name: Paul Lambert Title: managing member

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)

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TALLAHASSEE

**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: Paul Elwin Lambert ~~INC~~ \* Professional Corporation

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

Principal street address

Mailing address, if different is:

7840 Trail Run Loop

New Port Richey, FL 34653

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

to engage in any lawful activity for which corporations may be incorporated in this state.

**ARTICLE IV SHARES**

The number of shares of stock is: 1

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Paul Lambert, D

Name and Title: \_\_\_\_\_

Address: 7840 Trail Run Loop

Address: \_\_\_\_\_

New Port Richey, FL 34653

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

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**ARTICLE VI REGISTERED AGENT**

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

Name: Paul Lambert  
\_\_\_\_\_  
Address: 7840 Trail Run Loop  
\_\_\_\_\_  
New Port Richey, FL 34653  
\_\_\_\_\_

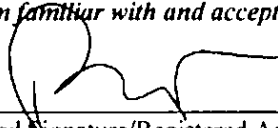
**ARTICLE VII INCORPORATOR**

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

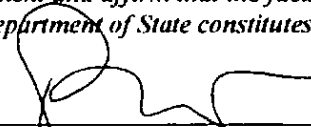
Name: Paul Lambert  
\_\_\_\_\_  
Address: 7840 Trail Run Loop  
\_\_\_\_\_  
New Port Richey, FL 34653  
\_\_\_\_\_

\*\*\*\*\*

*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  
10 Sept 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  
10 Sept 2019  
\_\_\_\_\_  
Date

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DEPARTMENT OF STATE