

# P22000041888

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

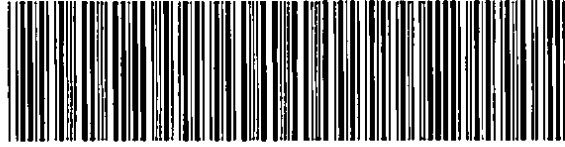
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



800388566988

05/27/22--01004--011 \*\*105.00

**FILED**

2022 MAY 27 PM 1:07

SECRETARY OF STATE  
TALLAHASSEE, FL

**RECEIVED**

2022 MAY 27 PM 1:41

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

Attached is a form to convert an "eligible business entity" into a "Florida Profit Corporation" pursuant to section 607.11933, Florida Statutes. These forms are basic and may not meet all conversion needs. The advice of an attorney is recommended.

<b>Filing Fees:</b>	<b>\$105</b>	<b>(\$35 Conversion Fee and \$70 for Florida Profit Articles of Incorporation)</b>
<b>Certified Copy (optional):</b>	<b>\$8.75</b>	
<b>Certificate of Status (optional):</b>	<b>\$8.75</b>	

Send one check in the total amount payable to the Florida Department of State.

Please include a cover letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

**Mailing Address:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

New Filing Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

For further information, you may contact the New Filings Section at (850) 245-6052.

**IMPORTANT INFORMATION:** Pursuant to section 607.1622 (9), F.S., "As a condition of a conversion of an entity to a corporation under s. 607.11930, the entity, if it exists under the laws of this state or if it exists under the laws of another jurisdiction and has a certificate of authority to transact business or conduct its affairs in this state, must be active and current in filing its annual reports in the records of the department through December 31 of the calendar year in which the articles of conversion are submitted to the department for filing."

CR2E105 (1/20)

COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: Capital Protection Plan, Inc  
Name of Resulting Florida Profit Corporation

The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S.

Please return all correspondence concerning this matter to:

Daniel E. Manalusa  
Contact Person

Manalusa, Shaw & Minacci  
Firm/Company

1701 Hermitage Blvd, Ste 100  
Address

Tallahassee, FL 32308  
City, State and Zip Code

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

For further information concerning this matter, please call:

Katie Rae at (850) 597-7616  
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

**Mailing Address:**  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
New Filing Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Conversion  
For  
Converting Eligible Entity  
Into  
Florida Profit Corporation

**FILED**  
2022 MAY 27 PM 1:07  
SECRETARY OF STATE  
TALLAHASSEE, FL

The Articles of Conversion **and attached Articles of Incorporation** are submitted to convert the following **eligible business entity into a Florida Profit Corporation** in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:

Capital Protection Plan, LLC

Enter Name of the Converting Entity

2. The converting 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

4/25/22

Enter date "Converting Entity" was first organized, formed or incorporated.

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

Capital Protection Plan, Inc.

Enter Name of Florida Profit Corporation

4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.

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

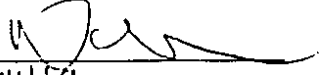
(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

**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.

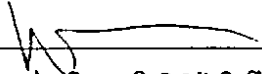
Signed this 27 day of May, 2022.

**Required Signature for Florida Profit Corporation:**

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

  
Printed Name: Daniel E. Manausa Title: Incorporator

**Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies:** [See below for required signature(s).]

Signature:   
Printed Name: Daniel E. Manausa Title: authorized representative

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:**

Articles 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  
FOR RESULTING FLORIDA PROFIT CORPORATION  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be: Capital Protection Plan, Inc

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

Principal street address  
3800 W. Tennessee Street  
Tallahassee, FL 32304

Mailing address, if different is:  
3800 W. Tennessee Street  
Tallahassee, FL 32304

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Automotive Sales

2022 MAY 27 PM 1:07  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V OFFICERS AND/OR DIRECTORS**

Name and Title: Peter Boulware - P

Address: 3800 W. Tennessee St.  
Tallahassee, FL 32304

Name and Title: Peter Boulware - VP

Address: 3800 W. Tennessee St.  
Tallahassee, FL 32304

Name and Title: Peter Boulware - S

Address: 3800 W. Tennessee St.  
Tallahassee, FL 32304

Name and Title: Peter Boulware - T

Address: 3800 W. Tennessee St.  
Tallahassee, FL 32304

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

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

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

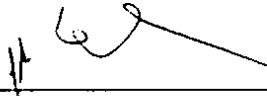
Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Daniel E. Manausa  
Address: 1701 Hermitage Blvd, Ste 100  
Tallahassee, FL 32308

\*\*\*\*\*  
*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

5/27/22  
Date

**FILED**  
**2022 MAY 27 PM 1:07**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FL**