

P24000029369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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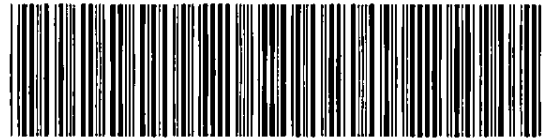
(Business Entity Name)

(Document Number)

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

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04/17/24--01011--013 \*\*105.00

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2024 APR 17 AM 11:31  
CLERK OF STATE  
TALLAHASSEE, FL

T. MATTHEWS

APR 29 2024

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Pro Coverage Group, 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:

Brandon Margolis

Contact Person

Pro Coverage Group, Inc.

Firm/Company

2900 N. University Drive

Address

Coral Springs, FL 33065

City, State and Zip Code

brandon@procoveragegroup.com

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

For further information concerning this matter, please call:

Brandon Margolis at (917) 699-1654

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    ☐ \$113.75 Filing Fees    ☐ \$122.50 Filing Fees,  
and Certificate of                      and Certified Copy                      Certified Copy, and  
Status    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**

2024 APR 17 AM 11:31

DEPARTMENT 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:

Pro Coverage Group, Inc.

Enter Name of the Converting Entity

2. The converting entity is a s-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 New York

(Enter state, or if a non-U.S. entity, the name of the country)

on 04/13/2016

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:

Pro Coverage Group, 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 8 day of March, 2024.

**Required Signature for Florida Profit Corporation:**

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

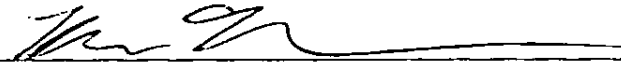


Printed Name: Brandon Margolis Title: President

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

Signature: \_\_\_\_\_

Printed Name: Brandon Margolis 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:**

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)

**FILED**

2024 APR 17 AM 11:31

SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLE I NAME**

The name of the corporation shall be: Pro Coverage Group, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

2900 N. University Drive  
Coral Springs, FL 33065

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Property & Casualty Insurance Brokerage

**ARTICLE IV SHARES**

The number of shares of stock is: 200

**ARTICLE V OFFICERS AND/OR DIRECTORS**

Name and Title: Brandon Margolis President

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

Address: 2900 N. University Drive  
Coral Springs, FL 33065

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

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

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

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

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

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

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

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

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

**ARTICLE VI REGISTERED AGENT**

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

Name: Brandon Margolis

Address: 2900 N. University Drive

Coral Springs, FL, 33605

\*\*\*\*\*

*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

3/8/24  
Date

P24000029369

Brandon Margolis

9214 NW 44<sup>th</sup> Ct.

Coral Springs, FL 33065

March 8, 2024

To whom it may concern,

As President of Florida Profit Corporation Pro Coverage Group Inc per Document Number P22000063108, which is currently inactive and dissolved showing a last event of: ADMIN DISSOLUTION FOR ANNUAL REPORT, do hereby release the name Pro Coverage Group, Inc. to be used. Our dissolution took place 9/22/23 and we give permission for the name to be released.

If any questions or concerns you can reach me directly at 1-917-699-1654.

Yours Truly,



Brandon Margolis

Registered Agent

2900 N. University Drive Ste 79

Coral Springs, FL 33065

917-699-1654

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S. J. CLARK  
CLERK OF STATE  
TALLAHASSEE, FL

T. MATTHEWS  
APR 29 2024