

Secretary of State Business Programs Division

Business Entities 1500 11th Street, Sacramento, CA 95814 P.O. Box 944260, Sacramento, CA 94244-2600

Business Entities Submission Cover Sheet

For fastest service, file online at bizfileOnline.sos.ca.gov.

Instructions:

- Complete and include this form with your paper submission. This form will not be made part of the filed document.
- Make all checks or money orders payable to the Secretary of State.
- In-person submissions (excluding Statements of Information): \$15 special handling fee. Do not include a \$15 special handling fee when submitting documents by mail.
- All submissions are reviewed in the date order of receipt, with online submissions given priority.
 For updated processing time information, visit www.sos.ca.gov/business/be/processing-dates.
- To obtain a certified copy, include certification fees with your submission.

Note: All correspondence related to your submission will be sent to the name and address on your check or money order.

Contact Person (Please type or print legibly):

First Name:	Last Name:			
Phone Number:	Email:			
Entity Information (Please type or print legibly):				
Entity Name:				
Entity Number (if applicable):				
Comments:				



Secretary of State

CONV GP-GS

Articles of Incorporation with Statement of Conversion –

California General Partnership to a California Stock Corporation

Filing Fee - \$150.00

Certification Fee (Optional) - \$5.00

Note: Most corporations have to pay a minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to

ftb.ca.gov.

		This Space For Office Use Only			
Name of Converted California Corporation (Go to www requirements and restrictions.)	.sos.ca.gov/business/be	name-reservations for g	eneral corp	oorate na	me
The name of the converted California corporation is					
2. Business Addresses of the Converted California Co	prporation (Enter the o	complete business addr	esses.)		
a. Initial Street Address of Corporation - Do not list a P.O. Box.	City (no abbreviation	s)	State	Zip Code	
b. Initial Mailing Address of Corporation, if different than item 2a.	City (no abbreviation	s)	State	Zip Coo	de et
3. Service of Process (Must provide either Individual OR Corporati		de de la companya de			
INDIVIDUAL – Complete Items 3a, 3b and 3c only. Must include age	nt's full name, California	street address and maili	ng address	i.	
a. California Agent's First Name (if agent is not a corporation).	Middle Name	Last Name			Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box.	City (no abbreviation	City (no abbreviations)		Zip Code	
c. Mailing Address (if agent is not a corporation).	City (no abbreviation)	CA State	Zip Code	
CORPORATION – Complete Item 3d. Only include the name of the r	egistered agent Corpora	ion.			
d. California Registered Corporate Agent's Name (if agent is a corporation) – D	o not complete Items 3a, 3	b and 3c.			
4. Shares (Enter the number of shares the corporation is authorized	to issue. Do not leave b	plank or enter zero (0).)			
This corporation is authorized to issue only one cla					

Articles of Incorporation with Statement of Conversion California General Partnership to a California Stock Corporation (Page 2 of 2)

5. Purpose Statement (Do not alter the Purpose Statement.)

The purpose of the corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Law of California other than the banking business, the trust company business or the practice of a profession permitted to be incorporated by the California Corporations Code.

6.	6. Statement of Conversion for California General Partnership					
6a	a. The name of the converting California general partnership is					
6b	b. The general partnership's California Secretary of State Entity Number (if registered) is				
6c.	c. The principal terms of the plan of conversion were approved by a vote of the partners, which equaled or exceeded the vote required under California Corporations Code section 16903.					
7.	Read, Declare and Sign Below. At least two partners must sign. Do not use computer generated signature. Additional article provisions set forth on attached pages, if any, are incorporated herein by reference and made part of this Form CONV GP-GS. (All attachments should be 8 ½ x 11, one-sided, legible and clearly marked as an attachment to this Form CONV GP-GS.)					
	I declare under penalty of perjury that the contents of this document are true.					
	Signature of Partner Type or Print Name	Partner of				
	and Incorporator. Enter Name of converting California GP					
	Signature of Partner Type or Print Name	Partner of				
	and Incorporator. Enter Name of converting California GP					