# P10001384

(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:				

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DEC 16 2010
EXAMINER



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10 DEC 13 PM 1:33 SECRETARY OF STATE ALLAHASSEE, FLORID

### **COVER LETTER**

TO:	Registration Division of C			
SUBJ	ECT:	TAUDORT	UILEROY , LI	-C
		Name of R	esulting Florida Profit Corp	poration
The er	nclosed Certifi r Business Ent	cate of Conversion, Ar ity" into a "Florida Pro	ticles of Incorporation, fit Corporation" in acc	and fees are submitted to convert an ordance with s. 607.1115, F.S.
Please	return all corr	espondence concerning	g this matter to:	
	wu	PIASCOS Contact Person		
	PAUS	Firm/Company	1,10C.	
	4900	N. OCEAN E	24ND. #216	
	FORT	NAUDENDAL City, State and Zip Code	-, FL 33308	3
E-		be used for future annual re		
For fu	rther informati	on concerning this mat	ter, please call:	
	بس	PIA-SCO S	at ( 954 ) 87	2-6 · 9995
	Name of Cor	ntact Person	Area Code and Dayti	me Telephone Number
Enclos	sed is a check t	for the following amou	nt;	
<b>运 \$</b> 10:	5.00 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: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		MAILING A Registration S Division of C P. O. Box 632 Tallahassee, I	Section orporations 27	

Tallahassee, FL 32301

## **Certificate of Conversion**

For

### "Other Business Entity"

Into

# Florida Profit Corporation

This Certificate of Conversion <u>and attached Articles of Incorporation</u> 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:
RAWNATUREDOY, LLC
Enter Name of Other Business Entity
2. The "Other Business Entity" is a
first organized, formed or incorporated under the laws of FLOR (Enter state, or if a non-U.S. entity, the name of the country)  on FRIDARY 13, 2008  Enter date "Other Business Entity" was first organized, formed or incorporated of T
on FEBRUARY 13, 2008 .ΜΥ ω
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 <u>attached Articles of Incorporation:</u>
PAWLOATURESOY, INC.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date:  (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)
6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting the conversion.
7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

Page 1 of 2

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Signed this 8th day of December	, 20 6
a third degree felony as provided for in s. \$17.155,	is document are true. Any false information constitutes F.S.
Signature of Chairman, Vice Chairman, Director, Coselected, an Incorporator:  Printed Name:	Afficer, or, if Directors or Officers have not been
stated in this document are true. Any false informat s.817.155, F.S. [See below for required signature(s).]	Entity: Individual(s) signing affirm(s) that the facts ion constitutes a third degree felony as provided for in
Signature: Printed Name: Signature:	Title: PRESIDENT
Signature:Printed Name:	
Signature:Printed Name:	_ Title:
Signature:Printed Name:	
Signature:Printed Name:	Title:
Signature: Printed Name:	_ Title:
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	•
All others: Signature of an authorized person.	
Fees:  Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$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:	unerboy, inc.
ARTICLE II PRINCIPAL OFFICE	,
Principal street address	Mailing address, if different is:
4900 NOUEAL END.	
SUITE 216	
FORT LAUDER DAKE FO	-
·	30°E
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
NUTRITIONAL SUPPLEHEN	
ARTICLE IV SHARES	
The number of shares of stock is: 100	
The number of shares of stock is.	
ARTICLE V INITIAL OFFICERS AND/OR DIRE	CTORS
Name and Title: NICK CTERLO-FF	Name and Title:
Address: 4000 N. OCEAN CH	Address:
SUITE 216	
FORT LAUDER DAIL	E.A. 33308
Name and Title: WW PIRSCOS- V	.P Name and Title:
Address: 4000 N. OCTAL R	اللح Address:
Suite 216	<u> </u>
FOILT LAUDIENDAN	E,FL 33308
Name and Title: \ LONEL VEGA	-CEDName and Title:
Address: Maoo N. OCEAN > F	Address:
SUITE 216	
PORT LAUDETZ	DAVE, FL
ARTICLE VI REGISTERED AGENT	<sup>'</sup> 33308
The name and Florida street address (P.O. Box NOT accepta	ible) of the registered agent is:
Name:	and OA
Address: 1840 Conti Work	
LIALI, FL 33	145
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: War PIA-SLOS	
Address: 4900 L. OCETAL	> 12LUD. #816
FORT HAUDER	DANE, FL 3330p
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 registerea agent and agree to act in this capacity
	•=1 -1.
	12 08 15 Date
Required Sgnature/Registered Agent	Date
I submit this document and affirm that the facts stated here document to the Department of State donstitutes a third degre	in are true. I am aware that any false information submitted in a e felony as provided for in s.817.155, F.S.
/ / /	1
	12/08/16
Required Signature/Informator	Date