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#### **COVER LETTER**

TO: **Charter Section Division of Corporations** 4334 NW 9 Ave 71E Investment Corp 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: Lilianete Medeiros Contact Person 4334 NW 9 Ave 71E Investment Corp Firm/Company 5120 NW 123rd Ave Address Coral Springs FL. 33076 City, State and Zip Code lilianm@lilianm.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Lilian Medeiros 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 **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



September 29, 2014

LILIANETE MEDEIROS 5120 N.W. 123RD AVE. CORAL SPRINGS, FL 33076

SUBJECT: 4334 NW 9 AVE 71E INVESTMENT CORP

Ref. Number: W14000059392

We have received your document for 4334 NW 9 AVE 71E INVESTMENT CORP and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Incorporation, if any.

The Certificate of Conversion must be signed by an authorized person.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

You must list at least one incorporator with a complete business street address.

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

Please return the corrected original and one copy of 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.

Maryanne Dickey Regulatory Specialist II New Filing Section

www.sunbiz.org

Letter Number: 114A00020811



October 10, 2014

LILIANETE MEDEIROS 5120 N.W. 123RD AVE. CORAL SPRINGS, FL 33076

SUBJECT: 4334 NW 9 AVE 71E INVESTMENT CORP

Ref. Number: W14000059392

We have received your document for 4334 NW 9 AVE 71E INVESTMENT CORP and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

You must list at least one incorporator with a complete business street address.

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

Please return the corrected original and one copy of 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.

Maryanne Dickey Regulatory Specialist II New Filing Section

Letter Number: 114A00020811

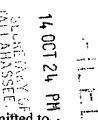
## **Certificate of Conversion**

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 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:

# 4334 NW 9 Ave 71E Investment LLC 114100006308 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 4/22/2014 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 attached Articles of **Incorporation:** 4334 NW 9 Ave 71E Investment Corp 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.)

Signed this 23 day of September	, 20 14
Required Signature for Florida Profit Corporat	ion:
Signature of Chairman, Vice Chairman, Director, Cheen selected, an Incorporator:  Printed Name: Lilianete De Medeiros  Title:	
Required Signature(s) on behalf of Other Busines signature(s).]	s Entity: [See below for required FLORII 514]
Signature: Levalus  Printed Name: Lluanck medlus	Title: MGC
Signature:Printed Name:	Title:
Signature:Printed Name:	
Signature: Printed Name:	
Signature:	
Printed Name:  Signature:	
Printed Name:	Title:
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> 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: 4334 NW 9 Ave 71E Investment Corp PRINCIPAL OFFICE The principal place of business/mailing address is: Principal street address Mailing address, if different is: \_\_\_ 5120 NW 123rd Ave Coral Springs FL. 33076 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Manage Real Estate ARTICLE IV SHARES The number of shares of stock is: INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Lilianete Medeiros Mgr Name and Title: 5120 NW 123rd Ave Coral Springs FL. 33076 Address: 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: Lilianete De Medeiros Name: 5120 NW 123rd Ave Coral Springs FL. 33076 Address:

ARTICL	E VII INCORPORATOR	
The name	and address of the Incorporator is:	OCT LAH
Name:	<u>Lihanek</u> . Medeuros	Т <b>24</b> НА\$\$
Address:	5120 NW 123 Ame	me <b>n</b>
	Coeal Springs F13307	1 3: 54 FLORIDA
	een named as registered agent to accept service of process for ti I in this certificate, I am familiar with and accept the appointment of	
	een named as registered agent to accept service of process for to d in this certificate, I am familiar with and accept the appointment of	
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designated capacity  I submit t	d in this certificate, I am familiar with and accept the appointment of the certificate, I am familiar with and accept the appointment of this document and affirm that the facts stated herein are true.	Segistered agent and agree to act in this  9/23/14  Date  I am aware that any false information
designated capacity  I submit t	d in this certificate, I am familiar with and accept the appointment of the certificate, I am familiar with and accept the appointment of this document and affirm that the facts stated herein are true.	Date  I am aware that any false information felony as provided for in s.817.155, F.S.

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