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(Reque	estor's Name)	
(Addre	ss)	
(Addre		
(Addre	33)	
(City/S	tate/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Busin	ess Entity Name)	
(Docur	ment Number)	
Certified Copies	Certificates of	Status
Special Instructions to Fili	ng Officer:	

Office Use Only



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2020 AUG 19 AHTH: 56

COVER LETTER

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

ALB ENTERPRISES CORP

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:

JOSE ALBERTO SARAOZ JUAREZ

Contact Person

ALB ENTERPRISES CORP

Firm/Company

4731 CASON COVE DR APT 1311

Address

ORLANDO, FL 32811

City, State and Zip Code

ALBENTERLLC@GMAIL.COM

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

For further information concerning this matter, please call:

945-7770 JOSE ALBERTO SARAOZ JUAREZ Area Code and Daytime Telephone Number Name of Contact Person

Enclosed is a check for the following amount:

■ \$105.00 Filing Fees □\$113.75 Filing Fees □\$113.75 Filing Fees □\$122.50 Filing Fees. Certified Copy, and and Certificate of and Certified Copy

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 Tallahassee, FL 32303

Certificate of Status

Articles of Conversion For Converting Eligible Entity Into Florida Profit Corporation

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.

	Enter Name of the Converting Entity
. The converting entit	visa limited liability company
	(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 (Fater state, or if a non II S. antity, the name of the country)
	(Effect state, of h a non-o.s. efficy, the name of the country)
on 06/02/2017	
	Enter date "Converting Entity" was first organized, formed or incorporated.
2 The many of the file	aida Dan Ga Carananaina an ant farth in the attended Auticlas of Incompanyations
	rida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u>
ALB ENTER	PRISES CORP®
	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: 08/17/2020

 (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.

2020 AUG 19 AHTH: 56

Signed this 17 day of AUGUST	20	
Required Signature for Florida Profit Corporation	on:	
Signature of Director, Officer, or, if Directors or Off	ficers have not been selected, an Incorporator	:
Jugan		
Printed Name:	RESIDENT	
Required Signature(s) on behalf of Converting Fl	orida partnerships, limited partnerships,	and limited liability
companies: [See below for required) signature (s).]		
Signature:		_
Printed Name: JOSE AUBERTO SARAOZ JUAREZ	_{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 Liabili Signature of one General Partner.	ity Partnership:	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ity Limited Partnership:	207
If Florida Limited Liability Company:		202 0 6US
Signature of a Member or Authorized Representative	e.	19
All others: Signature of an authorized person.		
Fees:		AH II: 5E

2

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: ALB ENTERPRISES CORP

PRINCIPAL OFFICE

ARTICLE II

731 CASON C	Principal street address	Maili	ng address, if different is:	
ORLA	NDO, FL 32811			
RTICLE	III PURPOSE			
	for which the corporation is organized is:	NITOO		
AIN Y F	AND ALL LEGAL BUSI	INESS.		
RTICLE .	IV SHARES of stock is:			
	IV SHARES of stock is: 100			
RTICLE	V OFFICERS AND/OR DIRECTORS			
RTICLE Jame and T	V OFFICERS AND/OR DIRECTORS	Name and Title:		_
RTICLE ame and T	V OFFICERS AND/OR DIRECTORS Title: OFFICERS AND/OR DIRECTORS OFFICERS AND/OR DIRECTORS			_
RTICLE ame and T ddress:	V OFFICERS AND/OR DIRECTORS Title: 4731 CASON COVE DR APT 1311	Name and Title: Address:		— — —
ame and T ddress:	V OFFICERS AND/OR DIRECTORS Title: 4731 CASON COVE DR APT 1311 ORLANDO, FL 32811	Name and Title: Address: Name and Title:		
ARTICLE Iame and T Address:	V OFFICERS AND/OR DIRECTORS Title: 4731 CASON COVE DR APT 1311 ORLANDO, FL 32811 Title:	Name and Title: Address: Name and Title: Address:		
ame and T ddress: ame and T	V OFFICERS AND/OR DIRECTORS JOSE A. SARAOZ JUAREZ - PRESIDENT 4731 CASON COVE DR APT 1311 ORLANDO, FL 32811	Name and Title: Address: Name and Title: Address:		2/20 2
ARTICLE Vame and T Address: Vame and T	V OFFICERS AND/OR DIRECTORS Title: JOSE A. SARAOZ JUAREZ - PRESIDENT 4731 CASON COVE DR APT 1311 ORLANDO, FL 32811 Title: Title:	Name and Title: Address: Name and Title: Address: Name and Title:	51 STURY 20	299 200
ARTICLE Name and T Address: Jame and T	V OFFICERS AND/OR DIRECTORS JOSE A. SARAOZ JUAREZ - PRESIDENT 4731 CASON COVE DR APT 1311 ORLANDO, FL 32811	Name and Title: Address: Name and Title: Address: Name and Title:	51 STURY 20	299 200
ARTICLE Vame and T Address: Vame and T	V OFFICERS AND/OR DIRECTORS Title: JOSE A. SARAOZ JUAREZ - PRESIDENT 4731 CASON COVE DR APT 1311 ORLANDO, FL 32811 Title: Title:	Name and Title: Address: Name and Title: Address: Name and Title:	51 STURY 20	2/20 2

ARTICLE VI REGISTERED AGENT

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

Name:

JOSE ALBERTO SARAOZ JUAREZ

Address:

4731 CASON COVE DR APT 1311

ORLANDO, FL 32811

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

08/17/2020

Date