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(Requestor's Name)

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(City/State/Zip/Phone #)

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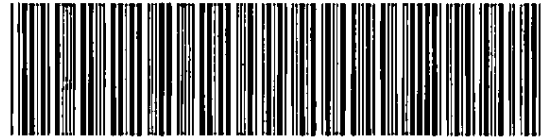
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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06/10/19--01020--010 **25.00

08/08/19--01035--002 **80.00

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TALLAHASSEE, FLORIDA

N. SAMS

AUG 20 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 9, 2019

SYLVIA MARTINEZ DE JASSO
3971 SW 8TH STREET, STE. 305
MIAMI, FL 33134 US

SUBJECT: ELE 4701, LLC
Ref. Number: W19000073072

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TALLAHASSEE, FLORIDA

We have received your document for ELE 4701, LLC 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 title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

Please return 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.

Nadira D McClees-Sams
Regulatory Specialist II

Letter Number: 019A00016381

TO: Charter Section
Division of Corporations

SUBJECT: ELE 4701, INC
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:

Rafael E Sosa

Contact Person

Rafael E. Sosa, P.A.
Firm/Company

3971 SW 8th Street, Suite 305
Address

Miami, FL 33134

City, State and Zip Code

rsosa@sosacpa.com

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

For further information concerning this matter, please call:

Name of Contact Person _____ at (305) 442-7672 _____
Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$105.00 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:

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

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** 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:

ELE 4701, LLC

Enter Name of Other Business Entity

2. The "Other Business Entity" is a 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
(Enter state, or if a non-U.S. entity, the name of the country)

on 08/30/2016
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**:

ELE 4701, INC

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: 04/01/2019

(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.

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TALLAHASSEE, FLORIDA

Signed this 26 day of July, 2019.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an

Incorporator: Sylvia L. de Jasso

Printed Name: Sylvia Martinez de Jasso Title: President

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: Sylvia L. de Jasso

Printed Name: Sylvia Martinez de Jasso Title: Managing Member

Signature: [Signature]

Printed Name: Mauricio Jasso Martinez Title: Managing Member

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:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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TALLAHASSEE, FLORIDA

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: ELE 4701, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Principal street address

3971 SW 8th Street, Suite 305

Miami, FL 33134

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of the corporation is to engage in any lawful activity for which corporations may be incorporated in this state

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TALLAHASSEE, FL

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Silvia Martinez de Jasso / President

Address: 3971 SW 8th Street, Suite 305

Miami, FL 33134

Name and Title: Andres Jasso Martinez / VP

Address: 3971 SW 8th Street, Suite 305

Miami, FL 33134

Name and Title: Giuliana Jasso Martinez / VP

Address: 3971 SW 8th Street, Suite 305

Miami, FL 33134

Name and Title: Belisario Rodolfo Jasso Baldini/ Secretary

Address: 3971 SW 8th Street, Suite 305

Miami, FL 33134

Name and Title: Daniella Jasso Martinez / VP

Address: 3971 SW 8th Street, Suite 305

Miami, FL 33134

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

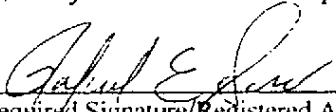
Name: Rafael E. Sosa, P.A.
Address: 3971 SW 8th Street, Suite 305
Miami, FL 33134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

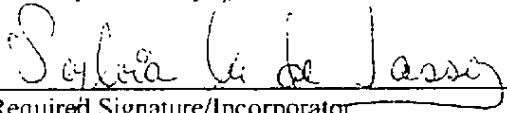
Name: Silvia Martinez de Jasso
Address: 3971 SW 8th Street, Suite 305
Miami, FL 33134

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

7/29/19
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Required Signature/Incorporator

July 29, 2019
Date

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