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	(Add	iress)	
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	(City	//State/Zip/Phone	: #)
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Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation Non Frefir

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:

2. The "Other Business Entity" is a <u>Limited Liability</u> (Ompany (Enter entity type: Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)

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:

State of Florida

4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:

5. If not effective on the date of filing, enter the effective date: $\underline{Ap_{11} + 25^{16}} = 0.000$.

(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.

Page 1 of 2



· · ·	
Signed this 6th day of May	, 20 <u> </u>
Required Signature for Florida Profit Corporation	<u>.</u> .
Signature of Chairman, Vice Chairman, Director, Oili Incorporator: Printed Name: <u>frantz Accime</u> Title: <u>Pre</u>	cident
Required Signature(s) on behalf of Other Business	Entity: [See below for required signature(s).]
Signature:	
Printed Name: Frantz Accime	Title:
Signature:	
Printed Name:	
Signature:	
Printed Name:	
Signature:	
Printed Name:	
Signature:	
Printed Name:	
Signature:	
Printed Name:	
If Florida General Partnership or Limited Liability Signature of one General Partner.	Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	
<u>All others:</u> Signature of an authorized person.	,
Fees: Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$3.75 (Optional) \$8.75 (Optional)
Curd Goots of Stonie'	



Name and Title:	Nance and Title:
Address	Address:
······································	
Name and Title:	Name and Title:
Address	Address:

<u>ARTICLE VI</u> <u>REGISTERED AGENT</u> The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name:	Comez Accime
Address:	3701 NW 21St APt 215
	Laudercial & Lakes, Fr 3331
	INCORPORATOR
The <u>name and a</u>	ddress of the Incorporator is:
Manar	(rointz Accime

Name:	Goinez Accime
Address:	3701 NOV 2151 ST API 215
	lauderdate calles to 3331

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ARTICLE VIII _EFFECTIVE DATE:

Effective date, if other than the date of filing: $May (t^{+1}) \frac{\partial \partial \partial \dot{q}}{\partial t^{-1}}$. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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.

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

Comer accime Required Signature of Registered Agent

05/8/24 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.

Comes accine Required Signature of Incorporator

05/8/24

•		S OF INCOR th Chapter 617, F	PORATION .S., (Not for Profit)		
<u>ARTICLE1</u>	<u>NAME</u> e corporation shall be: <u>Patriot Voi</u>	ies Wilking	it Bortais Inc		
	PRINCIPAL OFFICE				
	Principal street address:		Mailing address, if different is:		
3701 NW 21St St API 015		3	•		
Lau	developer Lakes, Fr 33311	Li	uduidate Lakes, Fr. 3331		
The purpose f			anity that is locking to provide ne distressed, to the wide publics		
·····					
ARTICLE IV			rectors are elected and appointed: <u>Theoush</u>		
Name and Tit			le: Dr. Ancelet Joseph- Director		
Address	3721 NW 21St St MPT 215	Address:	Laudeciale Lalus, G 33311 -		
	Laurenary 1965 17 3331		<u></u>		
Name and Tit	le: Fontaine Braybien - Director	Name and Tit	le: Comer Actione - President		
Address	3701 NW 2151 3+ Mpt 216	Address:	3701 NW 214 Mpt 215		
	Landerriale Lalus, & 33311		Laudentale Lakes, 12 33311		
Name and Ti	lle: Magalle Joinvil - Secretary	Name and Ti	le: Thurne Accume Treasury		
Address	3121 Ne 1st Ave Api 3	Address:	3701 NW 3151 St Apt 215		
	Pompano Ben, Fr 330ke)		Laudendale ightes to 33311		

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