(Requestor's Name)			
(6.11			
(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:			
A. LUNT			

MAR 19 2009

EXAMINER

Office Use Only

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COVER LETTER

TO: Registration Division of	Section Corporations		Section of the second
SUBJECT: DOIS	MASTER MIND (Name of Resulti	ing Florida Profit Corporati	ion)
			n, and fees are submitted to ation" in accordance with s.
Please return all cor	respondence concernir	ng this matter to:	
PETER CAMACHO	(Contact Person)	·	•
CPASSOCIATED SE		·	2009 MAR 18 SECRETARY I
4545 FOREST HILL I	(Address)		R 18 PM
WEST PALM BEACH	I, FL 33415 (City, State and Zip Code)		I I I
For further informat	ion concerning this ma	utter, please call:	
PETER CAMACHO		at (561) 237	7-5520
	ontact Person)		aytime Telephone Number)
	for the following amou	•	,
□\$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:		MAILING A	ADDRESS:
Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	

Tallahassee, FL 32301

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: DOIS MASTER MIND LLC (Enter Name of Other Business Entity) 2. The "Other Business Entity" is a LIMITED LIABILITY CORPORATION (Enter entity type. Example: limited liability company, limited partnership: sole proprietorship, general partnership, common law or business trust, etc. first organized, formed or incorporated under the laws of FL (Enter state, or if a non-U.S. entity, the name of the country) on 6/25/2007 (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:** DOIS MASTER MIND INC (Enter Name of Florida Profit Corporation)

(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; <u>AND</u> 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed

5. If not effective on the date of filing, enter the effective date: 1/15/2009

therein.)

Signed this 15TH day of MARCH	, 20_09
Required Signature for Florida Profit Corpora	tion:
Signature of Chairman, Vice Chairman, Director, been selected, an Incorporator	dan mana
Printed Name: MARCELA VERGARA Title:	HAKE SIDEN I
Required Signature(s) on behalf of Other Busines signature(s).]	s Entity: [See below for required
Signature MARCELA VERGARA	
Printed Name: MARCELA VERGARA	Title: PRESIDENT
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	SEU FALL
Printed Name:	Title:
Signature:	SS 18
Printed Name:	Title:
Signature) (7)
Signature: Printed Name:	Title:
If Florida General Partnership or Limited Liabili	A • •
Signature of one General Partner.	ty tarthership.
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> 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: Certified Copy:	\$70.00 \$9.75 (Ontional)
Certificate of Status:	\$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:

DOIS MASTER MIND INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 2149 NE 48TH STREET LIGHTHOUSE POINT FL 33064

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ALL LEGAL PURPOSES

ARTICLE IV SHARES

The number of shares of stock is:

10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): MARCELA VERGARA PRESIDENT 2149 NE 48TH STREET LIGHTHOUSE POINT, FL 33064

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

ARTICLE VI REGISTERED AGENT

CPASSOCIATED SERVICES 4545 FOREST HILL BLVD S-10 WEST PLAN BEACH, FL 33415

ARTICLE VII **INCORPORATOR**

The name and address of the Incorporator is:

CPASSOCIATED SERVICES 4545 FOREST HILL BLVD S-10 WEST PLAN BEACH, FL 33415

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

Signature/Registered Agent

Signature/Incorporator

3/15/2009

Date

3/15/2009

Date