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(Requestor's Name)		
(Address)		
(Address)		
(National)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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Cartified Capies Cartificates of Status		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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SECRETARY OF STATE DIVISION OF CORPORATIONS

09 APR -2 AM In: 52

T. HAMPTON
APR - 3 2009

EXAMINER

COVER LETTER

TO: Registration	Section Corporations		
SUBJECT:	Everyday	has TNL	
SCHOLCI	(Name of Resulti	ng Florida Profit Corporation	on)
		-	a, and fees are submitted to ation" in accordance with s
Please return all con	respondence concernir	ng this matter to:	
Crystal	Beatty (Contact Person)		
•	(00.11.10.11.7)		
· · · · · · · · · · · · · · · · · · ·	(Firm/Company)		
1617 South	Federallwy #	302	
Pompano Be	(City, State and Zip Code)	,2	
For further informat	tion concerning this ma	itter, please call:	
CNSTAL BOOK (Name of C	eatly ontact Person)	at (Area Code and Da	5-8384 ytime Telephone Number)
Enclosed is a check	for the following amou	ınt:	
□\$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 ADDRES	SS:	MAILING A	ADDRESS:
Registration Section Division of Corpora		Registration Division of C	

P. O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

09 APR -2 AM 10: 52

Certificate of Conversion For "Other Business Entity" Into

Florida Profit Corporation

This Certificate of Conversion <u>and attached Articles of Incorporation</u> 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:
(Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>limited lability Company</u> , limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of Nokkla
(Enter state, or if a non-U.S. entity, the name of the country)
on February N. 2004 (Enter date "Other Business Entity" was first organized, formed or incorporated)
(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: Everyday ChAos INC.
(Enter Name of Florida Profit Corporation)
5. If not effective on the date of filing, enter the effective date: 5000 A5 filing (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

therein.)

Signed this 315th day of MARCH	, 20 09
Required Signature for Florida Profit Corporati	on:
Signature of Chairman, Vice Chairman, Director of been selected, an Incorporator: Printed Name: Chairman, Director of the	fficer, or, if Directors or Officers have no
Required Signature(s) on behalf of Other Business signature(s).]	Entity: [See below for required
Signature:Printed Name:	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signatura	
Signature:	Title:
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.	
All others: Signature of an authorized person.	09 A

\$35.00

\$70.00

\$8.75 (Optional) \$8.75 (Optional)

Fees:

Certificate of Conversion:

Certified Copy: Certificate of Status:

Fees for Florida Articles of Incorporation:

DIVISION OF CORPORATION 09 APR -2 AM 10: 52

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:

Everyday Chaos, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1617 South Federal Hwy #302 Ponparo Beach, FL 38062

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sales of goods + services

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Crystal Beatty, Chaneman 1617 S. Feterachung # 302 Pompanu Beach, FL 3301,2

ARTICLE VI REGISTERED AGENT

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

Cristar Beathy 16175. Federal Huy #302 Pompano Beach, FZ 33562

ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Caystraz Beatry 1617 South Federar Nuy #302, Pon	Pan Ben 6 F 2200
**************************************	**************************************
capacity capacity	MAC 31 DOOG
Signature/Registered Agent	Date 11 2009
Signature/Treorporator	Date