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☐ PICK-UP ☐ WAIT ☐ MAIL						
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(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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O9 DEC 24 AH H: 40 SECRETARY OF STATE FAULAHASSEE, FLORIDA

S. HAWKES
DEC 2 8 2009
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: BEPRIME, 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 607.1115, F.S.
Please return all correspondence concerning this matter to:
Laxmanrao Venigalla
Contact Person
Laxmanrao Venigalla
Firm/Company
1019 Ashton Woods Lane
Address
Lakeland, FL 33813 City, State and Zip Code
Ivenigalla@gmail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Laxmanrao Venigalla at (508) 329 - 9836 Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
\$105.00 Filing Fees
STREET ADDRESS:MAILING ADDRESS:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsClifton BuildingP. O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

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Certificate of Conversion
"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.
accordance with \$. 607.1115, Florida Statutes.
1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
BEPRIME, INC
Enter Name of Other Business Entity
2. The "Other Business Entity" is a S Corporation
(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
on February 18, 2005
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:
Florida
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
BEPRIME, INC.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: December 24, 2009 (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; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

Signed t	this	21	_day of		Decemb	er	,,	20 <u>09</u>	·		
Required Signature for Florida Profit Corporation:											
Signatur been sel Printed	re of Cl ected, a Name:	nairma an Inco La	ın, Vice Cha orporator: _ xmanrao V	iirman, D enigalla	irector, O Luxuu Title:	Officer, C	or, if Direct Lewpull Pre	etors or Of lune	fficers hav	enot Y	
Required Signature(s) on behalf of Other Business Entity: [See below for required											
Signed this											
Printed 1	Name: 1	_axma	anrao Veni	galia	 	_ Title: _	<u>Presiden</u>	<u>t</u>		- 5	
Signatur Printed 1	e: Name:_					_ Title: _			·	_ _	
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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.											
F		Florid Copy			ration:		(Optional (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:

BEPRIME, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1019 Ashton Woods Lane Lakeland, FL 33813

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Information Technology Services and any lawful business allowed under Chapter 607 and Chapter 621, F.S. (Profit)

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

PRESIDENT - LAXMANRAO VENIGALLA - 1019 Ashton Woods Lane, Lakeland, FL 33813 TREASURER - LAXMANRAO VENIGALLA - 1019 Ashton Woods Lane, Lakeland, FL 33813 SECRETARY - LAXMANRAO VENIGALLA - 1019 Ashton Woods Lane, Lakeland, FL 33813 DIRECTOR - LAXMANRAO VENIGALLA - 1019 Ashton Woods Lane, Lakeland, FL 33813

ARTICLE VI REGISTERED AGENT

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

Laxmanrao Venigalla 1019 Ashton Woods Lane Lakeland, FL 33813

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Laxmanrao Venigalia 1019 Ashton Woods Lane Lakeland, FL 33813

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

Carrandes Meizable	12/21/2009
Signature/Registered Agent	Date
Carmando Verjale	12/21/2009
Signature/Incorporator	Date