

P10000002111

(Requestor's Name)

(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:

789/167/6461
~~6250~~ 671

Office Use Only



200163385582

12/14/09--01057--014 **122.50

P10-2111

W09-54461

Cert of Conv.
to Fla Corp

FILED
10 JAN 11 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. CAUSSEAU

JAN 11 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _

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:

Contact Person

Iber Moline

Firm/Company

ATKIVA L.L.C.

Address

2040 N.E. 199TH ST.

City, State and Zip Code

North Miami Beach, FL, 33179

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

For further information concerning this matter, please call:

Iber Moline

Name of Contact Person

at (305)

Area Code and Daytime Telephone Number

467-7700

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:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 16, 2009

IBER MOLINE
ATKIVA L.L.C.
2040 N.E. 199TH STREET
NORTH MIAMI BEACH, FL 33179

SUBJECT: ATKIVA L.L.C.
Ref. Number: L09000096692

We have received your document for ATKIVA L.L.C. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete #4 of the Certificate of Conversion.

Sections 607.1113, 608.4403, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by a member or an authorized representative of a member. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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) 245-6918.

Nanette Causseaux
Document Specialist Supervisor

Letter Number: 409A00038288



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 29, 2009

IBER MOLINE
ATKIVA L.L.C.
2040 N.E. 199TH STREET
NORTH MIAMI BEACH, FL 33179

SUBJECT: ATKIVA L.L.C.
Ref. Number: L09000096692

We have received your document for ATKIVA L.L.C. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Sections 607.1113, 608.4403, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by a member or an authorized representative of a member. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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) 245-6918.

Nanette Causseaux
Document Specialist Supervisor

Letter Number: 109A00039427

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation

10 JAN 11 AM 9:00
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

ATKIVA L.L.C.

Enter Name of Other Business Entity

209-96692

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 State of Florida
(Enter state, or if a non-U.S. entity, the name of the country)

on October 07, 2009
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:

Atkiva corporation
The Maline
president

5. If not effective on the date of filing, enter the effective date:
(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 this 1 hurs day of December, 10 20⁰⁹

Required Signature for Florida Profit Corporation:

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

Printed Name: Iber Moline Title: President

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

Signature: Iber Moline Title: President

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

FILED
10 JAN 11 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

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:

ATKIVA Corporation

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2040 N.E. 199TH STREET, NORTH MIAMI BEACH, FL, 33179

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

10,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

**IRIS C ZWICKER MS, 2040 N.E. 199TH STREET, NORTH MIAMI BEACH, FL, 33179 -
PRINCIPAL. IBER M MOLINE MR, 2040 N.E. 199TH STREET, NORTH MIAMI BEACH, FL,
33179-PRESIDENT**

ARTICLE VI REGISTERED AGENT

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


IBER M MOLINE MR, 2040 N.E. 199TH STREET, NORTH MIAMI BEACH, FL, 33179

ARTICLE VII INCORPORATOR

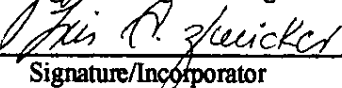
The name and address of the Incorporator is:

IRIS C ZWICKER MS, 2040 N.E. 199TH STREET, NORTH MIAMI BEACH, FL, 33179

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

Date **12/10/09**

Date **12/10/09**

FILED
10 JAN 11 AM 9:00
SECRETARY OF STATE
ATLANTA, GEORGIA