

P1000000 7076

(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:

W1-941

A. LUNT

JAN 26 2010

EXAMINER

Office Use Only



100163682671

01/07/10--01035--017 **122.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 JAN 22 AM 10:45

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 8, 2010

UGO V. CHIARATO
1680 MICHIGAN AVE. SUITE #1022
MIAMI BEACH, FL 33139

SUBJECT: MIKE DE BRIE INC.
Ref. Number: W10000000941

We have received your document for MIKE DE BRIE INC. 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 list the specific title of the person in article V.,

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) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 810A00000664

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MIKE DE BRIE 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 s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

UGO V. CHIARATO

Contact Person

CERTIFIED PUBLIC ACCOUNTANT

Firm/Company

1680 MICHIGAN AVENUE, SUITE # 1022

Address

MIAMI BEACH, FL 33139

City, State and Zip Code

micc@att.net

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

For further information concerning this matter, please call:

UGO V. CHIARATO

Name of Contact Person

at (305)

899-5099

Area Code and Daytime Telephone Number

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

MIKE DE BRIE GROUP (1896) LIMITED

Enter Name of Other Business Entity

2. The "Other Business Entity" is a FOREIGN CORP.#F08000004458
(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 ENGLAND AND WALES
(Enter state, or if a non-U.S. entity, the name of the country)

on AUGUST 18, 2006
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:**

MIKE DE BRIE INC.

Enter Name of Florida Profit Corporation

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.)

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TALLAHASSEE, FLORIDA

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Signed this 5TH day of JANUARY, 2010.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Sonja Di Cieri-Cambon

Printed Name: SONJA DI CIERI-CAMBON Title: PRESIDENT

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

Signature: Sonja Di Cieri-Cambon
Printed Name: SONJA DI CIERI-CAMBON Title: PRESIDENT

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

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TALLAHASSEE, FLORIDA

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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.

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:

MIKE DE BRIE INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1680 Michigan Avenue
Miami Beach FL 33139

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To carry on any lawful business which may seem to the Company to be capable of being conveniently or advantageously carried on to render profitable or more profitable any of the Company's property, assets or rights or expertise.

ARTICLE IV SHARES

The number of shares of stock is:

The authorised Stock Capital of the Corporation is \$100,000.00 divided into 100,000 Shares of \$1.00 each.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Sonja C. Di Cieri-Cambon **PRESIDENT**
15127 NE 24th Street, suite# 338, Redmond, WA 98052

ARTICLE VI REGISTERED AGENT

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

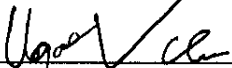
Ugo V. Chiarato
1680 Michigan Avenue
Miami Beach FL 33139

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sonja C. Di Cieri-Cambon
15127 NE 24th Street, suite# 338, Redmond, WA 98052

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

01/06/2010

Date

01/06/2010

Date

2010 JAN 22 AM 10:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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