

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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EXAMINER



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SECRETARY OF STATIONS

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COVER LETTER

Division of Corporations
SUBJECT: BLUE PORT TRADING, 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:
SALVADOR DIPP
Contact Person
MLP FINANCIAL GROUP, INC.
Firm/Company
4005 NW 114th AVE., SUITE 5
Address
DORAL, FL 33178 City, State and Zip Code
saldipp@premiumtaxservices.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SALVADOR DIPP at (405) 306-3858 Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
\$105.00 Filing Fees
STREET ADDRESS: Registration Section Division of Corporations Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

TO THE THE PROPERTY OF THE PRO

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" immedia of Conversion is:	ately prior to the filing of this Certificate							
BLUE PORT TRA	ADING .							
Enter Name of Other Bu	isiness Entity							
2. The "Other Business Entity" is a (Enter entity type. Example: limited liability general partnership, common law or business.								
first organized, formed or incorporated under the law (Enter state, or if a non-U.S. entity,								
on 08/04/2009	08/04/2009							
Enter date "Other Business Entity" was first	organized, formed or incorporated							
3. If the jurisdiction of the "Other Business Entity" verthe laws of which it is now organized, formed or income								
FLORIDA	·							
4. The name of the Florida Profit Corporation as set Incorporation:	forth in the attached Articles of							
BLUE PORT TRADIN	G, INC.							
Enter Name of Florida Pro	ofit Corporation							
5. If not effective on the date of filing, enter the effective date: 1) cannot be prior to nor mor document is filed by the Florida Department of St effective date listed in the attached Articles of Incotherein.)	e than 90 days after the date this ate; <u>AND</u> 2) must be the same as the							

Signed this	24	_day of	· F	EBRUA	RY	, 20_10	0
Required S	Signature	e for Florida	Profit Co	rporati	on:		
Signature of been select Printed Nar	f Chairma ed, an Inc ne:D	an, Vice Cha corporator:	irman, Dir	Title:	fficer, or	PRESIDE	or Officers have no
Required S signature(s)	ignature((s) on behalf	of Other I	<u>Business</u>	Entity:	See below for	r required
Signature: Printed Nam	ie: DANI	EL COTAR	ELO		Title: <u>N</u>	IGRM	
Signature: Printed Nan	ne:				Title:		
Signature: Printed Nan	ne:				Title:		
Signature: Printed Nan	ne:				Title:		
Signature: Printed Nan	ne:		 -		Title:		
Signature: Printed Nan	ne:				Title:		
If Florida (Signature of		artnership o eral Partner.	r Limited	Liability	Partner	ship:	
		artnership o eneral Partne		Liability	Limited	Partnership	<u>:</u>
		iability Com er or Authoriz		entative.			
All others: Signature of	an authoi	rized person.					
Fees Cert				ation:	•	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:

BLUE PORT TRADING, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 4805 NW 79th AVE., SUITE 3 DORAL, FL 33166

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DANIEL COTARELO, PD 1060 BRICKELL AVE., APT 3313 MIAMI, FL .33131 ROBERTO PONCE VPD 3168 OHIO ST MIAMI, FL 33133

ARTICLE VI REGISTERED AGENT

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

MLP FINANCIAL GROUP, INC. 4005 NW 114th AVE., #5 DORAL, FL 33178

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DANIEL COTARELO 4805 NW 79th AVE., # 3 DORAL, FL 33166

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

Signuture/Registered Agent

02/24/2010

Date

02/24/2010

Date

Signature/Incorporator