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(Red	questor's Name)	
(Add	dress)	
(Ad	dress)	
(City	y/State/Zip/Phone	e #)
. PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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C. LEWIS

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EXAMINER

COVER LETTER

TÖ:	Registration S Division of C				
SUR.	ЈЕСТ:	JUI	NGLE MIAMI	, INC.	
5050	,ECT		esulting Florida I		poration
		•			, and fees are submitted to convert an cordance with s. 607.1115, F.S.
Pleas	e return all corr	espondence concerning	g this matter to):	
	Al	LINA BROUWER			
		Contact Person			
	JUN	IGLE MIAMI, INC.	•		
		Firm/Company			
	9300 SOUT	H DIXIE HIGHWAY, S	SUITE 203		
		Address			
		MIAMI, FL 33156			
	(City, State and Zip Code			
	ALI@ E-mail address: (to	JUNGLEMIAMI.CO	OM eport notification	i)	
For f	urther informati	ion concerning this ma	tter, please cal	1:	
	ALINA BF	ROUWER	at (786	738	-3841
	Name of Cor	ntact Person		and Dayti	ime Telephone Number
Encl	osed is a check	for the following amou	ınt:		
5 1	05.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	2\$113.75 Fill and Certified C		□\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Publisher		MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327			
Clifton Building 2661 Executive Center Circle		Tallahassee, FL 32314			

Tallahassee, FL 32301

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 Busine'ss Entity" immediately prior to the filing of this Certificate of Conversion is: L09000096042 JUNGLE MIAMI, LLC Enter Name of Other Business Entity 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 _____FLORIDA (Enter state, or if a non-U.S. entity, the name of the country) 10/05/2009 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: JUNGLE MIAMI, 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.)
- 6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting the conversion.
- 7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

•		
Signed this 15TH day of DECEMBER	, 20 <u>2010</u>	
Dequired Signature for Floride Profit Cornerati	071	
Required Signature for Florida Profit Corporation		•
Individual signing affirms that the facts stated in thi		ion constitutes
a third degree felony as provided for in s.817.155, F	F.S.	
		_
Signature of Chairman, Vice Chairman, Prector, O	officer of, if Directors or Officers have n	ot been
selected, an Incorporator:		
selected, an Incorporator: Printed Name: ALINA BROUWER Pittle:	PRESIDENT	
Required Signature(s) on behalf of Other Business		
stated in this document are true. Any false informat		rovided for in
s.817.155, F.S. [See below for required signature(s).]		
CM/L		
Signature:		
Printed Name: CHARLES K FINK JR.	_ Title: MANAGER	
Signature: Printed Name:		
Printed Name:	_ Title:	
Signature:		
Printed Name:	_ Title:	
		_
Signature:		7 _{.5} 2
Signature:Printed Name:	_ Title: ?	题 -
		2011 JAN 12 SECRETARY
Signature:		三 一
Printed Name:	_ Title:	ARY C
Signature:		PS E
Printed Name:		95
		A D 19
If Florida General Partnership or Limited Liabilit	y Partnership:	
Signature of one General Partner.		
If Florida Limited Partnership or Limited Liabilit	y 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)	
	· -	

FILED

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

9

ARTICLE I	NAME	•	•	, ,	ZUII JAN 12 AM HOFT
	corporation shall be:	JUNGLE MIAI	MI, INC.		SECRETARY OF STATE
ARTICLE II	PRINCIPAL OFFICE				TALLAHASSEE, FLORIE
	Principal street address		N	Mailing address, if	different is:
	SOUTH DIXIE HIGHWAY, SUITE 2	03			
MIAMI, I	FL 33156				
ARTICLE III	DIIDDOGE				
	which the corporation is organized	zed is:			
ANY AND ALL	LAWFUL BUSINESS				
ARTICLE IV					
The number of sh	hares of stock is: 100				
	INITIAL OFFICERS AND				
	Title: ALINA BROUWER, PRESIDENT		Name and Title:		
Address:	9300 SOUTH DIXIE HIGHWAY, SUITE MIAMI, FL 33156		Address:		
	MINMI, FE 33100				
Name and	Title:		Name and Title	:	
Address:			Address:		
					
	Title:	· · · · · · · · · · · · · · · · · · ·	Name and Title		
Address:			Address:		
				ALINA BROUWER	
APTICLE VI	REGISTERED AGENT				
	Florida street address (P.O. Box	NOT acceptable) of t	the registered age	nt is:	
Name:	ALINA BROUWER				
Address:	9300 SOUTH DIXIE HIGHWAY, SUI	TE 203			
	MIAMI, FL 33156				
	INCORPORATOR				
	ddress of the Incorporator is:				
Name:	ALINA BROUWER				
Address:	9300 SOUTH DIXIE HIGHWAY, SUIT MIAMI, FL 33156	E 203			
	med as registered agent to acce am familiar with and accept the				
	X 7	//			
			12/15/2	2010	
Rec	quired Signature/Registered Age	nt	Date		
I as bande di !- 1		to stated by the same		that any falsa in	formation submitted in a
i submit this do document to the	cument and affirm that the fac Department of State constitutes	as statea nezein are t a third devree felonv	rae. 1 am aware as provided for i	inai any jaise inj in s.817.155. F.S.	огницоп ѕиотиеч іп и
	- The constitutes	- John John Market		,,	
\		/	12/15/	2010	
Req	uired Signature/Incorporator		Dat	e	