# P11000022486

(Requestor's Name)
(Address)
(Address)
( law see)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SECRETARY OF STATI

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EXAMINER

# **COVER LETTER**

Division of Co						
SUBJECT: AUXEM	A-STEMMANN-US	A TRADING CORF	<b>)</b> .			
	Name of R	Lesulting Florida Profit Co	rporation			
			n, and fees are submitt cordance with s. 607.			t an
Please return all corre	spondence concerning	g this matter to:				
MARIO L. NEIRA						
	Contact Person					
AUXEMA-STEM		DING CORP.				
	Firm/Company			<del>-</del> '		
8441 SW 148 PL.				A.H.L.A		
	Address				×××	<u> </u>
MIAMI, FLORIDA.	33193			RY OF	-7	E
Cit	ty, State and Zip Code			18.E	2	
auxema.stemman E-mail address: (to b	n.usa@gmail.com e used for future annual r	neport notification)		景高	4: 30	
For further informatio	n concerning this mat	tter, please call:				
Mario L Neira		at (_786) 283	2-4626			
Name of Conta	act Person	Area Code and Day	time Telephone Number			
Enclosed is a check for	or the following amou	nt:				
-	\$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

# **Certificate of Conversion**

For

# "Other Business Entity"

Into

## **Florida Profit Corporation**

This Certificate of Conversion <u>and attached Articles of Incorporation</u> 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:	f	
AUXEMA-STEMMANN-USA TRADING LLC L0300024370		
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	11 NAR -7	FILED
(Enter state, or if a non-U.S. entity, the name of the country)		O
on 07/03/2003  Enter date "Other Business Entity" was first organized, formed or incorporated	4: 30	
<ul> <li>3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the which it is now organized, formed or incorporated:</li> <li>FLORIDA</li> <li>4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation</li> </ul>		
AUXEMA-STEMMANN-USA TRADING CORP.		
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 docum filed by the Florida Department of State; AND 2) must be the same as the effective date lis 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 conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting the	the	

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

conversion.

currently organized, formed or incorporated.

Signed this 03	day of MARCH	, 20_11			
Required Sig	gnature for Florida Profit Corporat	tion:			
	ning affirms that the facts stated in the		mation	consti	itutes
	felony as provided for ip s.817,155,				
Ü					
Signature of C	Chairman, Vice Chairman, Director	Officer, or, if Directors or Officers ha	ve not b	een	
selected, an II	ncorporator: // / / / / / / / / / / / / / / / / /	ary			
Printed Name	: MARIO L NEIRA Title:	DIRECTOR	_		
Required Sig	nature(s) on behalf of Other Busines	s Entity: Individual(s) signing affirm	(s) that i	the fa	cts
	document are true. Any false informa				
	S. [See below for required signature(s).		us provi		OI III
	_	·J			
Signature:	MARIOL NEIRA MARIOL NEIRA				
Printed Name:	MARIOL NEIRA/	Title: DIRECTOR			
Signature:		Title	_		
Frinted Name:	· · · · · · · · · · · · · · · · · · ·	True:	_		
Sionature					
Printed Name:		Title:	_		
			_		
Signature:					
Printed Name:		Title:			
O' 4					
Signature:		Title	<b>-</b> .		
Filmed Name.		Title:	一区份	=	
Signature:			_¥C?!	25	
Printed Name:		Title:	_55	MAR	T
	•		- SS &	1	=
	neral Partnership or Limited Liabili	ty Partnership:	ring.	~	LU.
Signature of o	ne General Partner.	·	三 二 公	==	
lf Florida Lin	nited Partnership or Limited Liabili	ty Limited Partnership.	오프	+:	
	ALL General Partners.	ry Limited 1 arthership.		ယ	
				_	
If Florida Lin	nited Liability Company:				
	Member or Authorized Representative	letfeterif			
	(	July 1			
All others:		- / .			
Signature of a	n authorized person.				
Fees:					
	cate of Conversion:	\$35.00			
	or Florida Articles of Incorporation:	\$70.00 \$70.00			
	ed Copy:	\$8.75 (Optional)			
	cate of Status:	\$8.75 (Optional)			
		Tarre (abrigues)			

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

8441 SW 148 PL. MIAN		Mailing address, if different is:				
ETICLE III PURPOSE  Purpose for which the corporation	_	UL BU	ISII	٧E	S	
TICLE IV SHARES						
number of shares of stock is:	100					
TICLE V INITIAL O		RECTORS				
Name and Title: MARIOL NEI		Name and Title:				
Address: 8441 SW 1481	PL MAIMI, FL. 33193	Address:				
Name and Title:Address:		Name and Title:Address:				
A A L		Name and Title:Address:				
			MARIO L. NEIRA			
name and Florida street ad	RED AGENT  dress (P.O. Box NOT acc	eptable) of the registered agen	t is:	SECRI	<b>=</b>	
Name: MARIOL NI Address: 8441 SW 144	EIRA 8 PL MIAMI, FL 33193			累妥	MAR	77
Address;	0 FC MIAMI, FL 33193	<del></del>		SS 전	1	
				ino.	-	T
TICLE VII INCORPOR	· · · · · · · · · · · · · · · · · · ·		r	77	==	$\subset$
name and address of the Inc				$Q:\mathbb{Z}^{1}$	1-	
Name: MARIO L. NE Address: 8441 SW 148	PL MIAMI, FL. 33193	<del></del>			ယ	
Addition in		<del></del>			$\Box$	
ring been named as registere	ed agent to accept service	of process for the above state	ed corporation	at the place	desigr	ratec
<b>1 0</b> . //	<i>A</i>	ent as registered agent and a	gree to act in ti	his capacity		
Ulle	reey	03/03/2011				
			<del></del>			
Required Signature	registered Agenit	Date				
bmit this document and affi	rm that the facts stated h	erein are true. I am aware ti	hat anv false i	nformation s	ubmit	ted i