(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	1
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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09/06/11--01032--008 **105.00

EFFECTIVE DATE

C. LEWIS
SEP SUN
EXAMINER

COVER LETTER

TO: Registration Section

Tallahassee, FL 32301

Division of C	Corporations			
SUBJECT: ziipa, l	nc.			
SCHOLCI, AND		Resulting Florida	Profit Co	poration
				a, and fees are submitted to convert ar cordance with s. 607.1115, F.S.
Please return all corr	respondence concerning	g this matter	to:	
Leon Starusta				
	Contact Person			
ziipa, Inc				
	Firm/Company			
1305 Isleworth Ct				
	Address			
Royal Palm Beach	-i			
C	City, State and Zip Code			
pstarusta@gmail E-mail address: (to	.COM be used for future annual r	eport notification	n)	
For further informati	on concerning this ma	tter, please ca	ıll:	
Leon Starusta		at (561	۱ 459	-6462
Name of Cor	itact Person		 /	me Telephone Number
Enclosed is a check f	for the following amou	ınt:		
☑ \$105.00 Filing Fees	\$113.75 Filing Fees and Certificate of Status	□\$113.75 Fi and Certified	_	\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES Registration Section	_	Reg	istration	
Division of Corporat Clifton Building	IOHS		ision of C D. Box 63:	Corporations 27
2661 Executive Cent	er Circle			FL 32314

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

FILED

2011 SEP -6 AM 10: 36

Florida Profit Corporation

SECRETARY OF STATE

FALLAHASSEE, 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:
ziipa,LLC L08000066441
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)
on July 9, 2008
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 <u>attached Articles of Incorporation</u> :
ziipa, 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.

Page 1 of 2

Signed this 29 day of August	' 1		
Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator. Printed Name: Leon J Starosta Title: Chairman Required Signature(s) on behalf of Other Business Entity; Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).] Signature: And A Starosta Title: MGR Signature: Printed Name: Pamela A Starosta Title: MGR Signature: Title: MGRM Signature: Printed Name: Title: Signature of one General Partnership or Limited Liability Partnership: Signature of ALL General Partners. If Florida Limited Partnership or Limited Liability Limited Partnership: Signature of ALL General Partners. 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)	Signed this 29 day of August	, 20_11	
Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator. Printed Name: Leon J Starosta Title: Chairman Required Signature(s) on behalf of Other Business Entity; Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).] Signature: And A Starosta Title: MGR Signature: Printed Name: Pamela A Starosta Title: MGR Signature: Title: MGRM Signature: Printed Name: Title: Signature of one General Partnership or Limited Liability Partnership: Signature of ALL General Partners. If Florida Limited Partnership or Limited Liability Limited Partnership: Signature of ALL General Partners. 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)	Required Signature for Florida Profit Corpora	tion:	
Signature of Chairman, Vice Chairman. Printed Name: Leon J Starusta Title: Chairman Required Signature(s) on behalf of Other Business Entity; Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).] Signature: Any Famela A Starusta Title: MGR Signature: Printed Name: Pamela A Starusta Title: MGRM Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Fignature: Printed Name: Title: Fignature: Printed Name: Title: Fignature: Printed Name: Title: Fignature of one General Partnership or Limited Liability Partnership: Signatures of ALL General Partners. If Florida Limited Partnership or Limited Liability Limited Partnership: 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)	Individual signing affirms that the facts stated in the	nis document are true. Any false inforr	nation constitutes
Required Name: Leon J Starusta Title: Chairman Required Signature(s) on behalf of Other Business Entity: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).] Signature: Leon J Starusta Title: MGR Signature: Printed Name: Title: MGRM Signature: MGRM Signature: Title: MGRM Signature: MGRM Signature: Title: MGRM Signature: MGR Signature: MGRM Signature: MGR Signatu	,		
Required Signature(s) on behalf of Other Business Entity: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).] Signature:	selected, all incorporator:		e not been
stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).] Signature: Parnela A Signusta Title: MGR Signature: Printed Name: Parnela A Signusta Title: MGRM Signature: Printed Name: Title: MGRM Signature: Printed Name: Title: Signature: Printed Name: Signature: Printed Name: Signature of one General Partnership or Limited Liability Partnership: Signature of one General Partnership or Limited Liability Limited Partnership: Signature of a Member or Authorized Representative. Hf Florida Limited Liability Company: Signature of an authorized person. Fees: Certificate of Conversion: \$35.00 Fees for Florida Articles of Incorporation: \$70.00 Certified Copy: \$8.75 (Optional)			
s.817.155, F.S. [See below for required signature(s).] Signature: Parmela A Starusta Printed Name: Parmela A Starusta Title: MGR Signature: Printed Name: Title: MGRM Signature: Printed Name: Title: Signature: Printed Name: Signature: Printed Name: Signature Title: Signature Name: Signature of one General Partners. If Florida Limited Partnership or Limited Liability Limited Partnership: Signature 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)	Required Signature(s) on behalf of Other Busines stated in this document are true. Any false informa	s Entity: Individual(s) signing affirm(stion constitutes a third degree felony a	s) that the facts
Printed Name: Pamela A Starusta Signature: Printed Name: Leon J Starusta Title: MGRM Signature: Printed Name: Title: Printed Name: Printed Name: Title: Printed Name: Title: Printed Name: Printed Name: Title: Printed Name: Printed Name: Title: Printed Name: Printed Name: Signature of one General Partnership or Limited Liability Partnership: Signature of ALL General Partners. If Florida Limited Partnership or Limited Liability Limited Partnership: 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)	s.817.155, F.S. [See below for required signature(s).		
Signature: Printed Name: Signature: Printed Name: Printed	Signature: Vanela A Starusta	Title: MCD	_
Printed Name Leon J Starusta Signature: Printed Name: Title: If Florida General Partnership or Limited Liability Partnership: Signature of one General Partners. 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: Fees for Florida Articles of Incorporation: S70.00 Certified Copy: \$8.75 (Optional)	M	Title. Work	_
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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)	Signatures of <u>ALL</u> General Partners.		
Fees: Certificate of Conversion: \$35.00 Fees for Florida Articles of Incorporation: \$70.00 Certified Copy: \$8.75 (Optional)			
Certificate of Conversion: \$35.00 Fees for Florida Articles of Incorporation: \$70.00 Certified Copy: \$8.75 (Optional)			
Fees for Florida Articles of Incorporation: \$70.00 Certified Copy: \$8.75 (Optional)			
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)

F.S. (Profit)	FILED
	2011 SEP - 6 AM
	SECRETARY AFT 0: 37
Mailing address, if	SECRETARY OF STATE different is: DOCT C+
5 ISKU	DOCTH C+ CHLORIDA
	Beach FC
	5 1

NAME The name of the corporation shall be: Ziipa, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

801 Northpoint Parkway #51

West Palm Beach, FL 33407

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

any	lawtul	busir	าess
DTICIPH C	UADEC		

	INITIAL OFFICERS AND/OR I	Name and Title:
Address:	1305 Isleworth Ct	. 11
	Royal Palm Beach, FL 33411	
Name and Tit	e: Pamela A Starusta, Vice-President	Name and Title:
Address: 13	1305 Isleworth Ct	Address:
	Royal Palm Beach, FL 33411	
Name and Tit	le:	Name and Title:
Address:	· - · · · · · · · · · · · · · · · · · ·	Address:
		Pamela Starusta
RTICLE VI	REGISTERED AGENT	
he <u>name and Flor</u>	ida street address (P.O. Box NOT a	cceptable) of the registered agent is:
Name:	Pamela Starusta	
Address:	1305 Isleworth Ct	

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Pamela A Starusta

Address:

1305 Isleworth Ct

Royal Palm Beach, FL 33411

Royal Palm Beach, FL 33411

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

Required Signature/Registered Agent

8/29/2011

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of Style constitutes a third slegree felony as provided for in s.817.155, F.S.

8/29/2011