#P12000045027

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(2-2
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: CORRECTIONS PER CONVERSATION
WITH STEVEN KOLLIAS 5-15-2012-
L

Office Use Only



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03/22/12--01025--011 **52.50

05/14/12--01031--001 **70.00

TIZ MAY IT AN 10: 17 Seorejary of State Allanasser florid

K. SALY EXAMINER

MAY 1 5 2012



March 26, 2012

NUWAY DISTRIBUTION LLC STEVE KOLLIAS 11721 US HWY 19 SOUTH ST, SHOP 19 PORT RICHEY, FL 34668

SUBJECT: NUWAY DISTRIBUTION LLC

Ref. Number: L09000073933

We have received your document for NUWAY DISTRIBUTION LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Letter Number: 712A00010191

Karen A Saly Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO:	Registration S Division of C					
SUBJ	ECT:	Nuway Di	stributi esulting Florida Prof	to √ fit Corporatio	1 NC	
		cate of Conversion, Art ty" into a "Florida Pro	ticles of Incorpor	ation, and f	fees are subm	
Please	return all corr	espondence concerning	g this matter to:			
	Steven	Kollia 5 Contact Person				
	Juway	Oistribut. Firm/Company	ON INC	_		
_34	138 AI	Vara Ct. Address				
5/	ring H	ity, State and Zip Code	1609			
<u>S7</u>	Heven Ko	//ias Dya be used for future annual re	port notification	7		
For fu	rther information	on concerning this mat	ter, please call:			
St	Name of Con		_at (<u>3 5 2</u>) Area Code and		3 2 - 2 a lephone Number	
Enclos	sed is a check f	or the following amous	nt:			
□ \$103	5.00 Filing Fees	\$113.75 Filing Fees and Certificate of Status	\$113.75 Filing F and Certified Copy	y Certi	122.50 Filing Fe ified Copy, and ificate of Status	
Regist Division Cliftor 2661 E	ration Section on of Corporat Building Executive Cent assee, FL 323	ions er Circle	Registra Division P. O. Bo	NG ADDR ation Section of Corpora ox 6327 ssee, FL 32	on rations	. 52.50



currently organized, formed or incorporated.

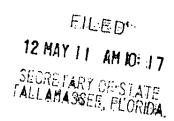
Certificate of Conversion

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:
Moway Distribution LLC Enter Name of Other Business Entity
Enter Name of Other Business Entity
2. The "Other Business Entity" is a
first organized, formed or incorporated under the laws of <u>Florida</u> (Enter state, or if a non-U.S. entity, the name of the country)
on
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>
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: May 30, 20/2 (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

Page 1 of 2

Signed this 8-19 day of May	
Required Signature for Florida Profit Corporat Individual signing affirms that the facts stated in th a third degree felony as provided for in s.817.155, l	is document are true. Any false information constitutes
Signature of Chairman, Vice Chairman, Director, C selected, an Incorporator: Wex Kollies Title:	Officer, or, if Directors or Officers have not been
	Entity: Individual(s) signing affirm(s) that the facts ion constitutes a third degree felony as provided for in
Signature: Alex Kolling Printed Name: Alexander M. Kollins	
Signature: Printed Name: Antonette Kollins	Title: President
Signature:Printed Name:	
Signature: Printed Name:	
Signature: Printed Name:	•
Signature:Printed Name:	_ Title:
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
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: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)



ي		•	C.
		INCORPORATION 07 and/or Chapter 621, F.S. (Profit) 12 MAI	FILEDE 11 AM 10:17
	•		11 84 10
ARTICLE I The name of the cor	NAME poration shall be: NOW BY D	TSTRIBUTION INCENTION Mailing address, if different	IRY OFFICE.
ARTICLE II	PRINCIPAL OFFICE	িপ্ৰ _থ	EE PINTE
26.26	Principal street address	Mailing address, if differen	nt is:
<u> 3438</u>	Alvare C+.		
$ \rho$ Γ	NG 7.11, P1. 37601	 	·
ARTICLE III 1	PURPOSE		
	ich the corporation is organized is:		
ANY AN	DALL LAWFUL BUSIN	ESS	
	SHARES es of stock is: 10, 000, 000		
ARTICLE V	INITIAL OFFICERS AND/OR DIREC	CTORS	
Name and Tit	le: Alexander M. Kollies CEO	Name and Title:	
Address:	3438 Alvara C1.	Address:	
	Spring H:11, F1 34609		
Name and Tit Address:	e: Autoinette S. Kollies Pors 2438 Alvera Ct. Spring Hill, Fl. 3460	Seed. Name and Title:Address:	
	·		
	e: Starn Kallies Treasu	Name and Title:	··· ·
Address:	3430 Alvere Ct, Spring H:11, F1 34609	Address:	· · · · · · · · · · · · · · · · · · ·
ARTICLE VI	REGISTERED AGENT		
	ida street address (P.O. Box NOT acceptal	ole) of the registered agent is:	
Name:	Alexandar Kollies	ARTICLE VIII	
. Address:	3438 Alvara Ct.	•	
	spring Hill, F1. 346	EFFECTIVE DATE	
ARTICLE VII	INCORPORATOR	MAY 30,2012	
The <u>name and addi</u>	ress of the Incorporator is:	·	
Name:	Steven Kollias		
Address:	ress of the Incorporator is: Steven Kollias 3438 Alvera Ct. Spring Hill Fl. 3466	09	
Having been named this certificate, I am	l as registered agent to accept service of p familiar with and accept the appointment	rocess for the above stated corporation at the pla as registered agent and agree to act in this capaci	ace designated in ty
Clay	Kada:	· 6 P-12	
Requir	Kolina ed Signature/Registered Agent		
I submit this docun	5	n are true. I am aware that any false informatio	n submitted in a
_	. 4	- · · · ·	
50	Signature/Incorporator	5-8-12 Date	
Require	d Signature/Incorporator	Date .	