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(Re	equestor's Name)			
(Address)				
(Ad	ldress)			
(Cil	ty/State/Zip/Phone	; #)		
PICK-UP	MAIT	MAIL		
(Ви	siness Entity Nan	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			

Office Use Only



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SECRETARY OF STATE

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COVER LETTER

TO:

Charter Section

B

Division of C	orporations			
SUBJECT:	Verified serv	ices .	Corpo	oration
SOBJECT.	Name of Resultin	g Florida Pro	fit Corpora	ation
				on, and fees are submitted to oration" in accordance with s.
Please return all corre	espondence concerning	g this matte	er to:	
Joac	quin LLano			
	Contact Person			
	Firm/Company		<u>_</u>	
995	0 SW 42 St			
•	Address			
Miam	i ,FL . 33165	5		
C	City, State and Zip Code			
	e@bellsouth.r			
E-mail address: (to	be used for future annual re	eport notifica	tion)	
	on concerning this mat	-		
Joaquin	LLano	_at (305	5 ₎ 4	50-9845
Name of Con	stact Person	Area Co	ode and Da	aytime Telephone Number
Enclosed is a check f	for the following amou	nt:		
■ \$105.00 Filing Fees	\$113.75 Filing Fees and Certificate of Status	□\$113.75 and Certific		S S 122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES Charter Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 323	ions er Circle	C D P.	harter Se vivision o . O. Box	f Corporations

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:
Verified Services LLC (L09-105668)
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, on if a non LLS, antity the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
11/02/2009
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 <u>attached Articles of Incorporation:</u>
Verified Services .Corporation
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.) Page 1 of 2

Signed this 26 day of April	, 20 <u>13</u> .
Required Signature for Florida Profit Corporat	ion:
Signature of Chairman, Vice Chairman, Director, C	Officer, or, if Directors or Officers have not
been selected, an Incorporator:	^
Printed Name: Diosdado Vazquez Title:	President
Required Signature(s) on behalf of Other Business	s Entity: [See below for required
signature(s).]	
Signature:	
Signature: Diosdado Vazque	Title: President
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabilit	ty Limited Partnership:
Signatures of ALL General Partners.	
If Florida Limited Liability Company:	
Signature of a Member or Authorized Representative	
All others:	ALC: 13
Signature of an authorized person.	Tri April 1980 April 1
Fees:	ASS:
Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	
Certified Copy:	\$70.00 \$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

Page 2 of 2

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

The name of the corporation shall be: Verified S	Services. Corporation
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
Principal street address 14252 SW 140 Street . Suite 112	Mailing address, if different is:
Miami, FL .33186	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Any Legal and lawful Pur	pose
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR D	IALL APR
Name and Title: Diosdado Vazquez. Pres	
Address: 14252 SW 140ST Miami,FL 33186	Address:
Name and Title:	
Address:	Address:
Name and Title:	Name and Title:
Address:	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT act Name: Joaquin LLano 9950 SW 24 St	eceptable) of the registered agent is:
Miami,FL.33165	

ARTICLE The name a	E VII INCORPORATOR and address of the Incorporator is:	
Name:	Diosdado Vazquez	
Address:	14252 SW 140 st ste112	
	Miami,FL 33186	

لم	Soul molecus	04/26/2013
(Required Signature/Registered Agent	Date
		tated herein are true. I am aware that any false information onstitutes a third degree felony as provided for in s.817.155, F.S.
0	9-71	04/26/2013
	Required Signature/Lycorporator	Date

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