

P 13000041282

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

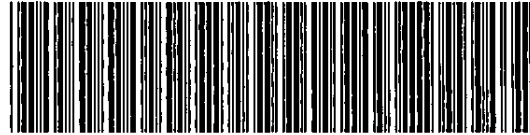
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 MAY -7 PM 2:21

PS 1813

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: JOBA TECHNOLOGIES, INC.

Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

FULTON ABRAHAM SANCHEZ CPA

Contact Person

BUSINESS INTELLIGENCE & CPA PA

Firm/Company

10661 N KENDALL DRIVE SUITE 201

Address

MIAMI FL 33176

City, State and Zip Code

SABRAM7@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

F A SANCHEZ CPA at (305) 332-3898

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$105.00 Filing Fees

☐ \$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:

Charter Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Charter Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

13 MAY -7 PM 2: 21

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 Business Entity" immediately prior to the filing of this Certificate of Conversion is:

JOBA TECHNOLOGIES, LLC L100000031119

Enter Name of Other Business Entity

2. The "Other Business Entity" is a

LLC

(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 **03/22/2010**

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:**

JOBA TECHNOLOGIES, INC.

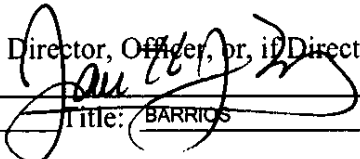
Enter Name of Florida Profit Corporation

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.)

Signed this 25 day of APRIL, 2013

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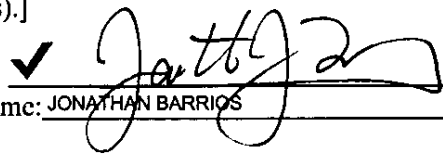
Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: ✓ 

Printed Name: JONATHAN

Title: BARRIOS

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: ✓ 

Printed Name: JONATHAN BARRIOS

Title: MANAGING PARTNER

Signature: _____

Printed Name: _____

Title: _____

Signature: _____

Printed Name: _____

Title: _____

Signature: _____

Printed Name: _____

Title: _____

Signature: _____

Printed Name: _____

Title: _____

Signature: _____

Printed Name: _____

Title: _____

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

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:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
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)

13 MAY -7 PM 2: 22

ARTICLE I NAME

The name of the corporation shall be: JOBA TECHNOLOGIES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Principal street address

Mailing address, if different is:

14565 SW 95TH LANE

MIAMI, FL 33186

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ALL LEGAL PURPOSE UNDER THE LAW

ARTICLE IV SHARES 100

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JONATHAN BARRIOS PRESIDENT

Name and Title: _____

Address: 14565 SW 95TH LANE

Address: _____

MIAMI, FL 33186

Name and Title: _____

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 acceptable) of the registered agent is:

Name: JONATHAN BARRIOS

Address: 14565 SW 95TH LANE

MIAMI, FL 33186

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

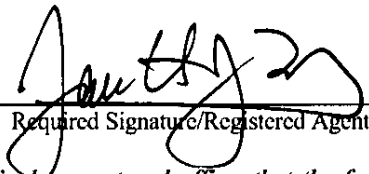
Name: FULTON ABRAHAM SANCHEZ CPA

Address: 10661N KENDALL DRIVE SUITE 201

MIAMI FL 33176

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

04/25/2013

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 State constitutes a third degree felony as provided for in s.817.155, F.S.

04/25/2013

Date

Required Signature/Incorporator

F A Sanchez - Incorporator