# P1300049698

(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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13 JUN -4 PM 4: 18

SECRETARY OF STATE
DIVISION OF CORPORATIONS

or 10/4/13

#### COVER LETTER

TO: Charter Section

**Division of Corporations** 

### SUBJECT: CAMFIVE USA CORP.

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:

\$113.75 Filing Fees

and Certificate of

Status

CARLOS F ALEGRE CASTANEDA	
Contact Person	
Firm/Company	
1629 PRIME CT SUITE 700	
Address	
ORLANDO, FL 32809	
City, State and Zip Code	
CALEGRE@CAMFIVE.COM	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
CARLOS ALEGRE at 407	851-5525
	Daytime Telephone Number
Enclosed is a check for the following amount:	

#### **STREET ADDRESS:**

\$105.00 Filing Fees

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

#### **MAILING ADDRESS:**

\$122.50 Filing Fees,

Certified Copy, and

Certificate of Status

□\$113.75 Filing Fees

and Certified Copy

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

DIVISION OF CORPORATIONS

13 JUN -4 PM 1.



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 21, 2013

63

CARLOS F ALEGRE CASTANEDA 1629 PRIME CT SUITE 700 ORLANDO, FL 32809

SUBJECT: CAMFIVE USA, CORP. Ref. Number: W13000006308

DEPARTHENT OF STATE DIVISION OF CORPORATIONS TALL AHASSEE, FLORIDA

13 JUN -4 PH 3: 27

We have received your document for CAMFIVE USA, CORP. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must be signed by a chairman, vice chairman, director, officer, or an incorporator, if directors or officers have not been selected.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 113A00012455

13 JUN -4 PM L: 18

www.sunbiz.org

DO DOM 0007 M 11 1 ..... Til. 11 .....



RECEIVED
13 MAY 14 AM 8: 04

BUISION OF CORPORATIONS

#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 27, 2013

CARLOS F ALEGRE CASTANEDA 1629 PRIME CT SUITE 700 ORLANDO, FL 32809

SUBJECT: CAMFIVE USA, LLC Ref. Number: W13000006308

We have received your document for CAMFIVE USA, LLC and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must be signed by a chairman, vice chairman, director, officer, or an incorporator, if directors or officers have not been selected.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 113A00007293

13 JUN -4 PM 4: 18



February 1, 2013

CARLOS F ALEGRE CASTANEDA 1629 PRIME CT SUITE 700 ORLANDO, FL 32809

SUBJECT: CAMFIVE USA, LLC Ref. Number: W13000006308

We have received your document for CAMFIVE USA, LLC and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

The Certificate of Conversion must be signed by an authorized person.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 213A00002575

13 JUN -4 PH L: 18

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## Certificate of Conversion For "Other Business Entity" Into

Florida Profit Corporation

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

13 JUN -4 PM 4: 18

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" in of Conversion is:	nmediately prior to the filing of this Certificate
CAMFIVE USA, LLC.	111000136132
Enter Name of O	ther Business Entity
2. The "Other Business Entity" is a LLC (Enter entity type, Example: limited	l liability company, limited partnership,
	ion law or business trust, etc.)
first organized, formed or incorporated under t	he laws of FLORIDA
on 12/02/2011	entity, the name of the country)
Enter date "Other Business Entity" wa	s first organized, formed or incorporated
3. If the jurisdiction of the "Other Business Enthe laws of which it is now organized, formed	• • • • • • • • • • • • • • • • • • • •
4. The name of the Florida Profit Corporation Incorporation:	as set forth in the attached Articles of
CAMFIVE USA, CORP.	
Enter Name of Flor	ida Profit Corporation
5. If not effective on the date of filing, enter the	ne effective date: 06/04/2013
document is filed by the Florida Departmen	or more than 90 days after the date this

therein.)

Signed this 7 day of MAY	, 20 13
Required Signature for Florida Profit Corpora	ation:
Signature of Chairman, Vice Chairman, Director, been selected, an Incorporator:  Printed Name: CARLOS ALEGRE  Title	Officer, or, if Directors or Officers have not
Required Signature(s) on behalf of Other Busines signature(s).]  Signature:	ess Entity: [See below for required
Signature: Printed Name: CARLOS ALEGRE	Title: DIRECTOR
Signature:	
Printed Name:	Title:
Signature:	mu
Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida General Partnership or Limited Liabi Signature of one General Partner.	lity Partnership:
If Florida Limited Partnership or Limited Liabi Signatures of <u>ALL</u> General Partners.	lity Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative	ve.
All others: Signature of an authorized person.	
Fees:	
Certificate of Conversion: Fees for Florida Articles of Incorporation	\$35.00 : \$70.00

Page 2 of 2

\$8.75 (Optional) \$8.75 (Optional)

Fees for Florida Articles of Incorporation:
Certified Copy:
Certificate of Status:

SECRETARY OF STATE CORPORATIONS

ARTICLES OF INCORPORATION

SECRETARY OF STATE
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ON OF CORPORATIONS

ARTICLE I	the corporation shall be: CAMFIVE US	A CORP.	13 JUN -4	PM 4: 18
ARTICLE I				
	Principal street address	Mailing a	ddress, if different is:	
1629 PI	RIME CT SUITE 700			
ORLAN	IDO, FL 32809			
	for which the corporation is organized is:  ND ALL LAWFUL BUSINES	S		
			.,.	<del></del>
	of shares of stock is:	PCTOPS		
ARTICLE  Name and T	CARLOS F ALEGRE CASTANEDA - PRESIDENT	Name and Title:		
Address:	1629 PRIME CT SUITE 700	Address:	<del>.</del> .	
	ORLANDO, FL 32809			<del></del>
Name and T	GUSTAVO F CAM RINCON - VP	Name and Title:		
Address:	1629 PRIME CT SUITE 700	Address:		
	ORLANDO, FL 32809		<del> </del>	<u>.</u>
Name and T	itle: SANDRA J CARRILLO E - SEC	Name and Title:		
Address:	1629 PRIME CT SUITE 700	Address:		<u></u>
	ORLANDO, FL 32809			
ARTICLE The name ar	nd Florida street address (P.O. Box NOT acce	ptable) of the registered agent is	<b>::</b>	
Name:	CARLOS F ALEGRE			
Address:	1629 PRIME CT SUITE 700			
	ORLANDO, FL 32809			

The <u>name</u>	and address of the Incorporator is:	
Name:	CARLOS F ALEGRE	
Address:	1629 PRIME CT SUITE 700	
	ORLANDO, FL 32809	
******	************	******
	en named as registered agent to accept service of pro in this certificate, I am familian with and accept the app	
capacity		5 5 5
	1)losa)	05/07/2013
	Required Signature/Registered Agent	Date
	his document and affirm that the facts stated herein	
submitted i	in a document to the Department of State constitutes a th	ird degree felony as provided for in s.817.155, F.S.
	/ ///// /	
	Hurk	05/07/2013
	Required Signature/Incorporator	05/07/2013 Date

ARTICLE VII INCORPORATOR

SECRETARY OF STATE DORPORATIONS

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