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(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP		MAIL
(Bu	isiness Entity Na	me)
(Dc	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	<u>-</u>
	Office Use Or	nly

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FILED 13 AUG-6 PM 3: 24 SECRETARY OF STATE FALLAHASSEE, FLORIDA

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COVER LETTER

TO: Charter Section **Division of Corporations**

Auyantepuy Of South Florida, Inc SUBJEC'

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:

Franklin Gutierrez

Contact Person

Firm/Company

11047 NW 8th CT

Address

Plantation, FL 33324

City, State and Zip Code

franklin.gutierrez.h@gmail.com

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

For further information concerning this matter, please call:

Franklin Gutierrez

Name of Contact Person

714-2301 561 Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$105.00 Filing Fees

STREET ADDRESS:

Tallahassee, FL 32301

Charter Section

Clifton Building

\$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

MAILING ADDRESS:

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

Division of Corporations 2661 Executive Center Circle

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:

Auyantepuy of South Florida, LLC

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 State of Florida (Enter state, or if a non-U.S. entity, the name of the country)

on

29/2013

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:**

Auyantepuy of South Florida, Inc

Enter Name of Florida Profit Corporation

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 03 day of August	, 20 <u>13</u>	
Required Signature for Florida Profit Corporat	lon:	
Signature of Chairman, Vice Chairman, Director, C	Officer, or, if Directors or O	officers have not
been selected, an Incorporator:	Chairman	
Required Signature(s) on behalf of Other Business signature(s).]	<u>s Entity:</u> [See below for req	uired
Signature: Marmell inojosa	Title: Secretary	AUG
Signature: h-ahon guticeez Brinted Name Abraham Gutierrez		
Signature: Mbranor S		TARY OF
Printed Name: Abraham Gutierrez	Title: Officer	<u> </u>
Signature: Marlin Luryon		FLO ST
Printed Name: Marilyn Inojosa	Title: Officer	FLORID
		d.
Signature: Printed Name:	Title:	
	······································	
Signature:	T'41	
Printed Name:		
Signature:		
Printed Name:	Title:	
If Florida General Partnership or Limited Liability Signature of one General Partner.		
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	y Limited Partnershid:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative		
All others: Signature of an authorized person.		
Fees:		
Certificate of Conversion: Ease for Elocida Articles of Incorporation:	\$35.00 \$70.00	
Fees for Florida Articles of Incorporation: Certified Copy:	\$70.00 \$8.75 (Optional)	
	30.731000000	

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

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Mailing address, if differ

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ARTICLE I NAME The name of the corporation shall be: Auyantepuy of South Florida, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Principal street address

11047 NW 8th CT

Plantation, FL 33027

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Management and consulting services.

Any and all lawful business

ARTICLE IV SHARES 100

	· · · · · · · · · · · · · · · · · · ·			
The	number	of share	s of stock is:	10

<u>ARTICLE V</u>	<u>INITIAL OFFICERS AND/OR DI</u>	<u>RECTORS</u>	
Name and Titl	e: Franklin Gutierrez, Chairman	Name and Title	Marmeli Inojosa, Secretary
Address:	11047 NW 8th CT	Address:	11047 NW 8th CT
	Plantation, FL 33324		Plantation, FL 33324
Name and Titl	_{e:} Marilyn Inojosa, Officer	Name and Title	Abrahan Gutierrez, Officer
Address:	11047 NW 8th CT	Address:	11047 NW 8th CT
	Plantation, FL 33324		Plantation, FL 33324
Name and Titl	e:	Name and Title	« <u>. </u>
Address:		Address:	
	<u></u>		
ARTICLE VI			
The <u>name and</u>	Florida street address (P.O. Box NOT acc	eptable) of the regis	stered agent is:
Α	brahan Gutierrez		

Name:	Abranan Gutierrez		
Address:	11047 NW 8th CT		
	Plantation, FL 33324		

<u>ARTICLI</u> The <u>name</u>	E VII INCORPORATOR and address of the Incorporator is:	TALL A	-
Name:	Abrahan Gutierrez	AST 6	
Address:	11047 NW 8th Ct	SEE.	'n
	Plantation, FL 33324		0
*******	****		2

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

V Q Vizelez Abeah

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Required Signature/Registered Agent

03-00-2012 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.

Abrahan gutterner

03-00-2013

Required Signature/Incorporator

Date