

P14000025422

(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:

WH-16009

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03/10/14--01032--006 **113.75

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DIVISION OF REGISTRATION
2014 MAR 19 PM 2:50

114

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: **ADVANCE/KINETICS LLC**

Advanced 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:

Amanda Jaramillo

Contact Person

J.A. Accounting Services Inc

Firm/Company

8906 W Flalger st. # 219

Address

Miami Fl 33174

City, State and Zip Code

amandajara@hotmail.com

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

For further information concerning this matter, please call:

_____ at (_____) _____
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 12, 2014

AMANDA JARAMILLO
J.A. ACCOUNTING SERVICES INC
8906 W FLAGLER ST. #219
MIAMI, FL 33174

SUBJECT: ADVANCED KINETICS LLC
Ref. Number: W14000016009

We have received your document for ADVANCED KINETICS LLC and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 314A00005423

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

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DIVISION OF CORPORATIONS
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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:

ADVANCE/KINETICS LLC — L10000042655

Advanced

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, or if a non-U.S. entity, the name of the country)

on **APRIL 21, 2010, EFFECTIVE APRIL 20, 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:**

ADVANCE/KINECTICS, CORP.

Advanced

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 18 day of March, 2014

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DIVISION OF CORPORATIONS

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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: Gloria M. Grajales

Printed Name: GLORIA M GRAJALES

Title: PRESIDENT

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

Signature: Gloria M. Grajales

Printed Name: GLORIA M GRAJALES

Title: PRESIDENT

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)

ARTICLE I NAME

The name of the corporation shall be:

ADVANCED KINETICS CORP

Advanced

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

5323 SW 125 AVE

MIRAMAR, FL 33027

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES OF \$1.00 DOLLAR EACH

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

GLORIA M GRAJALES

Name and Title:

Address:

5323 SW 125 AVE

Address:

MIRAMAR, FL 33027

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:

SPIEGEL & UTRERA, PA

Address:

1840 SW 22ND ST. 4TH FLOOR

MIAMI, FL 33145

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ARTICLE VII INCORPORATOR

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

Name: GLORIA M GRAJALES
Address: 5323 SW 125 AVEMIRAMAR
MIRAMAR FL 33027

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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

Gloria M Grajales
Required Signature/Registered Agent

3-6-14
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.

Gloria M Grajales
Required Signature/Incorporator

3-6-14
Date