PH000026903

(Requestor's Name)	
(Address)	
(Address)	
•	
(City/State/Zip/Phone #)	
PICK-UP WAIT MA	IL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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Office Use Only



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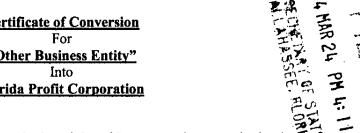


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COVER LETTER

TO: Charter Section	
Division of Corporation	_
SUBJECT: ULTRA BO	ODY BAR CORP.
Na	ame of Resulting Florida Profit Corporation
	nversion, Articles of Incorporation, and fees are submitted t tity" into a "Florida Profit Corporation" in accordance with
Please return all correspondence	ce concerning this matter to:
ALAIN	MAMANÉ Person
Contact	Person
•	
Firm/Co	mpany
20281	E Country Club DR, # 2012
Addr	ess
Aventuri	9, FL 33180
City, State ar	
•	E ME. COM future annual report notification)
For further information concer-	ning this matter, please call:
	at (954) 295-8685 Area Code and Daytime Telephone Number
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the foll	owing amount:
□ \$105.00 Filing Fees □ \$113.75 and Certific Status	5 Filing Fees and Certified Copy Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
New Filings Section Division of Corporations	New Filings Section Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314

Tallahassee, FL 32301



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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:
ULTRA BODY BAR LLC I WINDARDED
Enter Name of Other Business Entity
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
2/24/2011
on 2/24/2014 Enter date "Other Business Entity" was first organized, formed or incorporated
Enter date Other Business Entity was first organized, formed of 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: ULTRA BODY BAR CORP.
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 19 day of MARCH	, 20			
Required Signature for Florida Profit Corporat	. 			
Signature of Chairman, Vice Chairman, Directo	officer, or, if Directors or Officers	have no	ot	
been selected, an Incorporator: Printed Name: ALAIN MAMANE Title:	1/02-			_
Required Signature(s) on behalf of Other Business signature(s).]	s Entity: [See below for required			
Signature: Printed Name: Alain MAMANF	Title: MGR	Î	1	
			#AR	
Signature:Printed Name:	797.4 E	T		erangsan Union and S
Printed Name:	_ 11ue:	35	24	4 2
Signature:		, es	PH	
Printed Name:	_ Title:	<u>運</u> い	Ė.	<u></u>
Printed Name: Signature: Printed Name: Signature:	•			
Signature:Printed Name:	Title:			
Signature: Printed Name:	mt.d.			
Printed Name:	Title:			
Signature:				
Signature:Printed Name:	_ Title:			
If Florida General Partnership or Limited Liabilit Signature of one General Partner.				
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:			
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.				
All others: Signature of an authorized person.				
Fees:				
Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$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:	ULTRA	BODY	BAR	orp =
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing ad	<u>CE</u>		r	24 A 35
Principal street address 20281 E Country	Club BR		Mailing address,	if differentis:
# 2012		 		
AventuRA FL	33180			
ARTICLE III PURPOSE				
Any and ALL	•	Busic	ess	
ARTICLE IV SHARES The number of shares of stock is:	00 (0	NE HUN	ORED)	
ARTICLE V INITIAL OFFICER	S AND/OR DIRECT	ORS 4	n	
Name and Title: ALAIN MAMA	NE - Parado	me and Title:		
Address: 20281 Elbunta				
Aventura, FL	_			
Name and Title: LAROLINE AMA	R- C.F.Ona	me and Title:		
Address: 20291 F Count	CYClub Dr #Ad			
Aventura FL	33190			
Name and Title:	Na:	me and Title:		
Address:	Ad	dress:		
ARTICLE VI REGISTERED A The name and Florida street address (P.	O. Box NOT acceptable	e) of the registere	d agent is:	
Name: Alain M	AMANE			. 🖛
Address: 20281 E	Country CI	ub or.	, # 20	12
Aventura				

ARTICLE	E VII INCORPORATOR	
The name	and address of the Incorporator is:	
Name:	ALAIN MAMANE	
Address:	ALAIN MAMANE 20281 E. Country club Or, Aventura, FL 33180	# 20/3
	Aventura, FL 33180	# 20/4 11 11 11 11 11 11 11 11 11 11 11 11 11
	·	35 F
******	*************	************
designated	een named as registered agent to accept service of process for the abov. d in this certificate, I am familiar with and accept the appointment as regista	
capacity		
	AM	3/19/2014
	Required Signature/Registered Agent	' Date
I submit ti	ALAIN MAMANE this document and affirm that the facts stated herein are true. I am a	ware that any false information
submitted i	in a document to the Department of State constitutes a third degree felony of	is provided for in s.817.155, F.S.
		3/19/2014
	Required Signature Incorporation	Date
	ALAIN MAMANE	

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