

PK000032480

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☒ MAIL

(Business Entity Name)

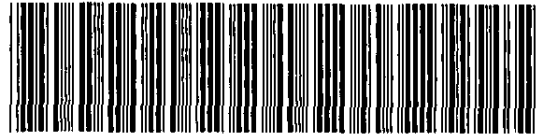
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

MAIL-OUT

Office Use Only



500257136735

03/17/14--01001--001 **113.75

RECEIVED
DEPARTMENT OF STATE
14 MAR 14 PM 2:25

FILED
14 APR 10 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/14-116759

MD 4/11

PLEASE MAIL TO:

FAST KIT CORP

Requester's Name

11250 NW 25 ST STE 100

Address

MIAMI, FL 33175

City/State/Zip

Phone #

Office Use Only

ARTICLES OF CONVERSION

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. ANALISA GRIMALDI LLC

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

☐ Walk in

☐ Pick up time

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

MAIL
out

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Analisa Grimaldi LLC

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:

Giovanni Castellanos

Contact Person

Accounting & Tax Services of S. FI

Firm/Company

6080 SW 40 St Suite10

Address

Miami, FL 33155

City, State and Zip Code

analysagrimaldilc@gmail.com

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

For further information concerning this matter, please call:

Analisa Grimaldi

Name of Contact Person

at (786) 468-0885

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

MAIL Out

29817



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 17, 2014

FASTKIT CORP
11250 N.W. 25TH ST., STE.100
MIAMI, FL 33175

SUBJECT: ANALISA GRIMALDI CORP
Ref. Number: W14000016759

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

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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 Incorporation, if any.

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.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 114A00005663



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 31, 2014

GIOVANNI CASTELLANOS ***2nd mailing***
ACCOUNTING & TAX SERVICES OF S.FL
6080 S.W. 40TH ST., SUITE 10
MIAMI, FL 33155

SUBJECT: ANALISA GRIMALDI CORP
Ref. Number: W14000016759

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

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

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 114A00005663

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 APR 10 PM 1:57

FILED

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:

Analisa Grimaldi LLC

L11000055374

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 05/10/2011

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:

ANALISA GRIMALDI 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.)

Signed this 5th day of MARCH, 2014.

Required Signature for Florida Profit Corporation:

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

Printed Name: ANALISA GRIMALDI Title: PRES

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

Signature: [Signature]
Printed Name: ANALISA GRIMALDI Title: PRESIDENT

Signature: [Signature]
Printed Name: ANALISA GRIMALDI Title: VICE-PRESIDENT

Signature: [Signature]
Printed Name: ANALISA GRIMALDI Title: SECRETARY

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)

FILED
14 APR 10 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: ANALISA GRIMALDI CORP

ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailling address is:

Principal street address

Mailing address, if different

6039 Collins Ave #1120
Miami Beach, Fl 33140

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Business Consulting

ARTICLE IV SHARES 100
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Analisa Grimaldi- Pres
Address: 6039 Collins Ave #1120
Miami Beach, Fl 33140

Name and Title: _____
Address: _____

Name and Title: Analisa Grimaldi-Vice-Pres
Address: 6039 Collins Ave #1120
Miami Beach, Fl 33140

Name and Title: _____
Address: _____

Name and Title: Analisa Grimaldi-Sec
Address: 6039 Collins Ave #1120
Miami Beach, Fl 33140

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Analisa Grimaldi
Address: 6039 Collins Ave # 1120
Miami Beach, Fl 33140

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14 APR 10 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Analisa Grimaldi
Address: 6039 Collins Ave #1120
Miami Beach, FL 33140

FILED
14 APR 10 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FL 32304

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

[Signature]
Required Signature/Registered Agent

03/05/2014

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.

[Signature]
Required Signature/Incorporator

03/05/2014

Date