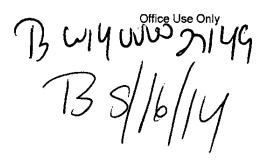
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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
_	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

Charter Section TO:

Division of Corporations

SUBJECT: Ideal C Inc

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:

Salena Dei	hl			
	Contact Person			
Ideal C Inc				
	Firm/Company			
1215 SE 2r	nd Ave, STE	102		
	Address			
Ft. Laudero	lale, FL 333 ⁻	16		
C	City, State and Zip Code			
idealc12@				
E-mail address: (to	be used for future annual r	eport notification)		
For further informati	on concerning this ma	tter, please call:		
Salena Dei	hl	_{at (} 954	,73	2-1391
Name of Con	tact Person	Area Code and	Daytin	ne Telephone Number
Enclosed is a check f	or the following amou	int:		
■ \$105.00 Filing Fees	☐\$113.75 Filing Fees and Certificate of Status	☐\$113.75 Filing and Certified Cop		\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES	S:	MAILI	NG A	DDRESS:

New Filings Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

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" immediately prior to the filing of this Certificate of Conversion is:			
Ideal C LLC - L 20000 0862			
Enter Name of Other Business Entity			
2. The "Other Business Entity" is a LLC (Enter antity type - Example: limited lightling company, limited partnership			
(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 FL (Enter state or if a pen U.S. entity, the name of the country)			
(Enter state, or if a non-U.S. entity, the name of the country) on 01/24/2012			
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 <u>attached Articles of Incorporation:</u>	DIVISION DE		
	- თალქ		
Enter Name of Florida Profit Corporation	A PROPERTY.		
5. If not effective on the date of filing, enter the effective date:	· 清		
(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; <u>AND</u> 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed			

therein.)

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Signed this 11 day of May	, 20 14
Required Signature for Florida Pro	ofit Corporation:
Signature of Chairman, Vice Chairm been selected, an Incorporator:	an, Director, Officer, or, if Directors or Officers have no
Printed Name: Salena Deihl	Title: President
Required Signature(s) on behalf of (Other Business Entity: [See below for required
signature(s).]	\wedge
Signature: The)
	Title: Partner
Signature:	Tr's l
Printed Name:	Title:
Signature:	m'd
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:

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.

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)

i ne principai	place of business/mailing address is:	
	Principal street address	Mailing address, if different is:
1215 SE 2nd Ave, STE 102 Ft. Lauderdale, FL 33316		401 E. Las Olas Blvd. STE 130-628
		Ft. Lauderdale, FL 33301
Any an	d all lawful business	
ARTICLE I The number o	6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
ARTICLE	of shares of stock is: 100 V INITIAL OFFICERS AND/OR DIR Colone Doild President	RECTORS
The number o ARTICLE Name and Tit	of shares of stock is: _TOO v	Name and Title:
The number of th	of shares of stock is: 100 V INITIAL OFFICERS AND/OR DIR Colone Doild President	RECTORS
The number of ARTICLE 1 Name and Tite Address:	v INITIAL OFFICERS AND/OR DIR tle: Salena Deihl, President 1215 SE 2nd Ave, STE 102	Name and Title:
The number of ARTICLE 1 Name and Tite Address:	v INITIAL OFFICERS AND/OR DIR tle: Salena Deihl, President 1215 SE 2nd Ave, STE 102 Ft. Lauderdale, FL 33316	Name and Title: Address:
The number of ARTICLE 19 Name and Tite Address: Name and Tite 19	v INITIAL OFFICERS AND/OR DIR 11e: Salena Deihl, President 1215 SE 2nd Ave, STE 102 Ft. Lauderdale, FL 33316	Name and Title: Address: Name and Title:
The number of ARTICLE Mame and Tite Address: Name and Tite Address: Address:	v INITIAL OFFICERS AND/OR DIR 11e: Salena Deihl, President 1215 SE 2nd Ave, STE 102 Ft. Lauderdale, FL 33316	Name and Title: Address: Name and Title: Address:

Name:

Salena Delni

Address:

1215 SE 2nd Ave., STE 102

Ft. Lauderdale, FL 33316

The <u>name</u>	and address of the Incorporator is:	
Name:	Salena Deihl	
Address:	1215 SE 2nd Ave., STE 102	
	Ft. Lauderdale, FL 33316	
******	************	*******
_		of process for the above stated corporation at the place the appointment as registered agent and agree to act in this
	8nDell	5/11/14
	Required Signature/Registered Agent	Date
		herein are true. I am aware that any false information tes a third degree felony as provided for in s.817.155, F.S.
	SADIL	5/11/14
	Required Signature/Incorporator	Date

ARTICLE VII

INCORPORATOR