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COVER LETTER

TO: Charter Section

Division of Corporations
SUBJECT: Cooke KHChen Two. 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:
Firm/Company Pau Horowtz Contact Person Forely ner Pore & Straw PA. Firm/Company
1301 664 57 N Address
St Petersburg F2 33710 City, State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Para Herrutz at (727) 347-1/20 Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
\$105.00 Filing Fees and Certificate of Status \$113.75 Filing Fees and Certified Copy Certified Copy, and Certificate of Status
STREET ADDRESS: New Filings Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: 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:
Cooks Krichen LLC Enter Name of Other Business Entity
Enter Name of Other Business Entity
2. The "Other Business Entity" is a homed highlity 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 non-U.S. entity, the name of the country)
- 1, 5/1-
Enter date "Other Business Entity" was first organized, formed or incorporated
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</u> Incorporation:
Cooks Kitchen INC.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: 9 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1

Signed this	day of	, 20
Required Sign	nature for Florida Profi	it Corporation:
Signature of C been selected,	hairman, Vice Chairman an Incorporator:	, Director, Office or, if Directors or Officers have not
Printed Name:	JAMES WILLIAMS	True:
Required Sign signature(s).]	ature(s) on behalf of Otl	her Business Entity: [See below for required
Signature:	2 D	VICHOLS Title:
Signature:	ally Nato	7/S
Printed Name:	HOW KLIAG	OS Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:_		Title:
Signature:		
Printed Name:_		Title:
Signature:		
Printed Name:_		Title:
	eral Partnership or Lim e General Partner.	ited Liability Partnership:
	<u>ited Partnership or Lim</u> <u>LL</u> General Partners.	ited Liability Limited Partnership:
	ited Liability Company: Member or Authorized Re	
All others: Signature of an	authorized person.	
Fees:		
Certific	ate of Conversion:	\$35.00
	r Florida Articles of Inco	orporation. \$70:00 \$8.75 (Optional)
	ed Copy: eate of Status:	\$8.75 (Optional)

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

The name of the corporation shall be: Ooks Kitchen Inc.	(f9/1/1
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
Principal street address 2902 W Gandy Blvd Tamps, F2 336/1	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Any And All law Al business	SECRETARY OF ST
ARTICLE IV SHARES The number of shares of stock is: //DOO ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	ALIONS TIONS
Name and Title: Janes Nichols Name and Title:	_
Address: 3126 W Harbor View Awaddress: Tanga F2 336/1	
Name and Title: Sally Nuchols Name and Title:	
Address: 3/26 W Harbur Vien Areaddress: Tamps, Fr 336/1	-
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: Thu Ho Powrt L Address: 13 - 66 th 5+ N St. Petrobar F7 337/6	_

ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the incorporator is:	
Name: JAMES Nichols	
Address: 3126 W Harbor View Ave	
Tampa FZ 33611	
Having been named as registered agent to accept service of process for the a designated in this certificate, I am familiar with and accept the appointment as recapacity	
Enthorals_	8/15/14
Required Signature/Registered Agent	Date
I submit this document and affirm that the facts stated herein are true. I a submitted in a document to the Department of State constitutes a third degree felo	
	8.15.14
Required Signature/Incorporator	8181A