

PI4000102025

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

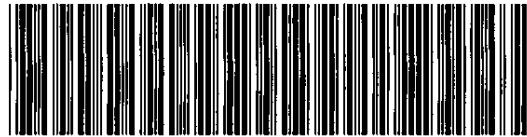
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Mr. Breton GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT #5 on conversion  
DATE 12/29/14  
DOC. EXAM V/H

Office Use Only



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12/24/14--01016--010 \*\*122.50

APPROVED  
AND  
FILED  
14 DEC 24 PM 2:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

114

## COVER LETTER

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** No limits packaging systems ~~1~~ corp

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:

**Edwin Breton**

Contact Person

**No Limits Packaging Systems LLC**

Firm/Company

**7560 nw 77th terrace**

Address

**Medly, Florida 33166**

City, State and Zip Code

**Nolimitspkg@gmail.com**

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

For further information concerning this matter, please call:

**Edwin Breton**

at ( 786 ) 3556018

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:**

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

APPROVAL  
AND  
FILED

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

14 DEC 24 PM 2:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

**No Limits Packaging Systems LLC**

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 1/31/14

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:

**No Limits Packaging Systems 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.)**

APPROVED  
AND  
FILED

Signed this 22 day of December, 20<sup>14</sup>

14 DEC 24 PM 2:02

**Required Signature for Florida Profit Corporation:**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have been selected, an Incorporator: Edwin Breton  
Printed Name: Edwin Breton Title: President

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

Signature: Edwin Breton  
Printed Name: Edwin Breton Title: President

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)

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AND  
FILED

ARTICLES OF INCORPORATION  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Proton) 14 DEC 24 PM 2:02

**ARTICLE I NAME** No Limits Packaging Systems Corp. SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The name of the corporation shall be:  
**ARTICLE II PRINCIPAL OFFICE**  
The principal place of business mailing address is:

Principal street address \_\_\_\_\_ Mailing address, if different is: \_\_\_\_\_  
7560 NW 77th terrace \_\_\_\_\_ Same \_\_\_\_\_  
Medley, Florida 33166 \_\_\_\_\_

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is:  
Conducting business in machinery manufacturing.

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

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: <u>Edwin Breton -President</u>	Name and Title: _____
Address: <u>7560 NW 77 terrace</u>	Address: _____
<u>Medley, Florida 33166</u>	
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: Edwin Breton  
Address: 7560 nw 77 terrace  
Medley, Florida 33166

APPROVAL  
AND  
FILED

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Edwin Breton  
Address: 7560 nw 77th terrace  
Medley, florida 33166

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\*\*\*\*\*  
*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*

Edwin Breton

Required Signature/Registered Agent

12/22/14

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.*

Edwin Breton

Required Signature/Incorporator

12/22/14

Date