

P15000000413

(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:

Office Use Only



700267703407

01/02/15--01008--015 **122.50

FILED
15 JAN -2 AM 8:30
FBI - MEMPHIS

MD 1/5

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: STUDENTS ROTATION SOFTWARE 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:

JOSEPH PEREIRA

Contact Person

Firm/Company

10300 SW 72 ST 470J

Address

MIAMI, FL 33173

City, State and Zip Code

mjoe1836@metzero.net

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

For further information concerning this matter, please call:

JOSEPH PEREIRA

Name of Contact Person

at (305) 598-3180

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

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:

STUDENTS ROTATION SOFTWARE LLC

Enter Name of Other Business Entity L13000064810

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 05/01/2013
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:**

STUDENTS ROTATION SOFTWARE INC.

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 29th day of December, 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: _____

Printed Name: MAXIME CACCHIONE Title: PRESIDENT

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

Signature: _____

Printed Name: ENRIQUE TRIAY Title: MGRM

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

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)

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: STUDENTS ROTATION SOFTWARE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address
6850 SW 24 ST, SUITE 405
MIAMI, FL 33155

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LEGAL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 1,457,140 COMMON SHARES NO PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MAXIME CACCHIONE PTD Name and Title: _____

Address: 3644 SW 57 AVE Address: _____
MIAMI, FL 33155

Name and Title: ENRIQUE TRIAY SD Name and Title: _____

Address: 5846 SW 33 ST Address: _____
MIAMI, FL 33155

Name and Title: ENRIQUE ROVERSI VPD Name and Title: _____

Address: 671 BILTMORE WAY, #201 Address: _____
CORA, GABLES, FL 33134

ARTICLE VI REGISTERED AGENT

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

Name: JOSEPH A. PEREIRA JR

Address: 10300 SW 72 ST 4704
MIAMI, FL 33173

15 JAN -2 AM 8:30

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOSEPH A. PEREIRA JR

Address: 10300 SW 72 ST 470J

MIAMI, FL 33173

15 JAN -2 AM 8:30
RECEIVED
MICHIGAN DEPT. OF STATE

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

Joseph A. Pereira, Jr.
Required Signature/Registered Agent

12/29/14
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.

Joseph A. Pereira, Jr.
Required Signature/Incorporator

12/29/14
Date