P1500000 3780

(Requestor's Name)			
(Address)			
(Ac	ldress)		
(City/State/Zip/Phone #)			
PICK-UP	WAIT	MAIL	
(Bu	isiness Entity Nai	me)	
(Document Number)			
Certified Copies	_ Certificate	s of Status	
Special Instructions to Filing Officer:			
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1-15-15 Ch

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:			
PAMPERING BUSINESS Entity Enter Name of Other Business Entity			
Enter Name of Other Business Entity			
2. The "Other Business Entity" is a			
(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			
first organized, formed or incorporated under the laws of			
(Enter state, or if a non-U.S. entity, the name of the country)			
10 -11 - 14			
Enter date "Other Business Entity" was first organized, formed or incorporated			
The same of the sa			
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:			
Do de Determination			
PAMPERING BUTTERFLES INC. Enter Name of Florida Profit Corporation			
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; <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.)			
··· ,			

	Signed this 23 day of Ollimb	<u>el</u> , 20 14.	
	Required Signature for Florida Profit Corporation:		
Ŋ	Signature of Chairman, Vice Chairman, Director, Cobeen selected, an Incorporator:	Officer, or, if Directors or Officers have not Lic Filshout Lice Filshout	
	Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]		
	Signature: MUUDLIA DMUUD Printed Name: MAN COLIJA CONTREL Title:		
	Signature: Printed Name:	Titles	
	Signature:Printed Name:		
	Printed Name:	_ Title:	
	Signature:		
	Signature:Printed Name:	Title:	
	Signature:		
	Signature:Printed Name:	_ Title:	
	Signature:		
	Printed Name:		
	If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:	
	If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:	
	If Florida Limited Liability Company: Signature of a Member or Authorized Representative		
	All others: Signature of an authorized person.		
	Fees: Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$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:	ERING BUTTERFIES INC
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
Principal street address 4 5 + 1+oners TEAD FL 330:	Mailing address, if different is:
HomenstEAD FL 330	3.5
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	Cil Business
ANT ANG ALL LI	awfil Business
ARTICLE IV SHARES The number of shares of stock is: 7000 ARTICLE V INITIAL OFFICERS AND/OR DI	RECTORS
Name and Title: MAR CO INA CONZALE Address: 2437 5E 14th 5	+Address:
Homenstebo A	3 3 0 3 S 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 acc	· ,
Name: MARLOLINA GUNZA	1/c2
Address: 2437 SE/4th HOMEASTEADE/	5t 33035

ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Name: MALLOLINA GONZAlez	2
Address: 2437 5 E 1446 5 +	_
Homenstead, FL 330.	35
***************	******
Having been named as registered agent to accept service of procedesignated in this certificate, I am familiar with and accept the appoint capacity	ss for the above stated corporation withe place in this extra as registered agent and agree mact in this
Malcolode Gongle	日日朝伊
Required Signature/Registered Agent	Date
I submit this document and affirm that the facts stated herein are submitted in a document to the Department of State constitutes a third	
Marcolia pmala	12/23/14
Required Signature/Incorporator	Date



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 31, 2014

MARCOLINA GONZALEZ 2437 SE 14TH STREET HOMESTEAD, FL 33035

SUBJECT: PAMPERING BUTTERFLIES, LLC

Ref. Number: W14000076935

We have received your document for PAMPERING BUTTERFLIES, LLC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A SIGNATURE IS REQUIRED FOR THE AREA THAT STATES "SIGNATURE FOR FLORIDA PROFIT CORPORATION",

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.

Christine Haney Regulatory Specialist II New Filing Section

Letter Number: 414A00027497

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