

P15000004304

Cypress Corporate

(Requestor's Name)

1000 Ponce De Leon Blvd

(Address)

Coastal Groves Fl.

(Address)

33134

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

A Qui Esta Drive Punta Gorda US Inc

(Business Entity Name)

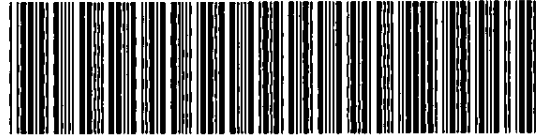
(Document Number)

Certified Copies ☒

Certificates of Status ☐

Special Instructions to Filing Officer:

Office Use Only



500267695595

01/16/15--01004--017 **113.75

RECEIVED
DEPARTMENT OF STATE
DIVISION OF DOCUMENTS
15 JAN 16 PM 1:16
NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

APPROVED
AND
FILED
15 JAN 16 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

AQUI ESTA DRIVE PUNTA GORDA US, LLC

215-6278

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 **January 12, 2015**

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**:

AQUI ESTA DRIVE PUNTA GORDA US, 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.)

APPROVED
AND
FILED

Signed this _____ day of _____, 20_____

15 JAN 16 PM 1:22

Required Signature for Florida Profit Corporation:

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: _____

Printed Name: Jorge Juan Flor Gallen

Title: President

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

Signature: Jorge Juan Flor Gallen

Printed Name: Jorge Juan Flor Gallen

Title: AMBR

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:

JAN/16/2015/FRI 01:30 PM

FAX No.

P. 003
APPROVED
AND
FILED

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, P.S. (Profit)

75 JAN 16 PM 1:22

ARTICLE I NAME

The name of the corporation shall be: AQUI ESTA DRIVE PUNTA GORDA US, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

INTERNATIONAL PLAZA

2655 LE JEUNE RD SUITE 905

CORAL GABLES, FL 33134

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REAL ESTATE / ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jorge Juan Flor Gallen (P) Name and Title: _____

Address: INTERNATIONAL PLAZA Address: _____

2655 LE JEUNE RD SUITE 905

CORAL GABLES, FL 33134

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

JAN/16/2015/FRI 01:30 PM

FAX No.

P. 004

APPROVED
AND
FILED (cont.)

15 JAN 16 PM 1:22

Name and Title: _____	Name and Title: <u>SECRETARY OF STATE</u>
Address _____	Address: <u>TALLAHASSEE FLORIDA</u>
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: EXPRESS CORPORATE FILING SERVICES
Address: 1000 PONCE DE LEON BLVD STE 105
CORAL GABLES, FL33134

ARTICLE VII INCORPORATOR


Required Signature/Registered Agent

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.


Required Signature/Incorporator

Date