P150000 27575

(Requestor's Name)				
(Address)				
(Address)				
(Audiess)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Coomeo Line)				
(Document Number)				
Certified Copies Certificates of Status				
Overeight at the A. Eth. Off.				
Special Instructions to Filing Officer:				





200270506222

03/23/15--01021--008 **105.00

SECHETARY OF STATE





COVER LETTER

TO: Charter Section Division of Corporations	
•	V, Inc.
	ing Florida Profit Corporation
	articles of Incorporation, and fees are submitted to "Florida Profit Corporation" in accordance with s.
Please return all correspondence concerning	ng this matter to:
lan O. Villasenor	
Contact Person	
IOV, Inc.	
Firm/Company	
11351 N.W. & Street	
Address	
Plantation, FL 33325-202	25
City, State and Zip Code	
peicons@bellsouth.net	
E-mail address: (to be used for future annual	report notification)
For further information concerning this m	atter, please call:
lan O. Villasenor	at (954)650-2716
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amo	ount:
■ \$105.00 Filing Fees	□\$113.75 Filing Fees and Certified Copy □\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS:	MAILING ADDRESS: New Filings Section
New Filings Section Division of Corporations	Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314

Tallahassee, FL 32301



Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

15 MAR 23 AM 8: 47

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:					
10 V, LLC - L14-158437					
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 LLS, entity, the name of the country)					
(Enter state, or if a non-U.S. entity, the name of the country)					
on October 6, 2014					
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:					
Florida					
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>					
I O V, 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 FILED

Signed this 19th day of March	, 20 15	- , , LLLD
Required Signature for Florida Profit Corporat	ion <u>:</u>	15 MAR 23 AM 8: 47
Signature of Chairman, Vice Chairman, Director, Cobeen selected, an Incorporator: Printed Name: AN O VILLASENOR Title:	Officer, or, if Directors or PRESIDE	SECRETARY OF STATE ALL ORIDA
Required Signature(s) on behalf of Other Businessionature(s)	s Entity: [See below for re	
Signature: 1. ANO. VILLASEATON		DENT
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 Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	y 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)

APPHOVEL FILED

15 MAR 23 AM 8: 47

ARTICLE	I NAME		
The name o	f the corporation shall be: I O V, Inc.		SECRETAR
	II PRINCIPAL OFFICE		TALLAHASSI
The princip	al place of business/mailing address is:		
	Principal street address		Mailing address, if different is:
1 O V, Inc	· · · · · · · · · · · · · · · · · · ·	~ ~~~	
11351	N.W. 7 Street		
Planta	tion, FL 33325-2025		
<u>ARTICLE</u>			
	se for which the corporation is organized is:		_ ,
busine	ess for profit / PROFESSIONAL	- corpor	26770N
ARTICLE	r of shares of stock is:		
The number	r of shares of stock is:		
ARTICLE	V INITIAL OFFICERS AND/OR DIR	ECTORS	
	_{Title:} lan O. Villasenor		tle: Yolanda A. Villasenor
Name and	11351 N.W. 7 St.	Name and 11	11351 N.W. 7 St.
Address:		Address:	
	Plantation, FL 33325-2025		Plantation, FL 33325-2025
Name and	Title:	Name and Tit	tle:
Address:		Address:	
Name and	Title:	Name and Ti	tle:
Address:		Address:	
<u>ARTICLE</u>	VI REGISTERED AGENT		
The <u>name</u>	and Florida street address (P.O. Box NOT acce	eptable) of the re	gistered agent is:
Name:	lan O. Villasenor		
Address:	11351 N.W. 7 St.		
	Plantation, FL 33325-2025		

Required Signature/Incorporator

Date