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(Requestor's Name)		
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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
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COVER LETTER

10:	Division of Co					
SHRI	FCT•	JOLI PROF	PERTIES INC.	•		
SODO	JBJECT: Name of Resulting Florida Profit Corporation					
		te of Conversion, Article Profit Corporation" in ac			ees are submitted to convert an "Other Busir 15, F.S.	iess
Please	return all corres	pondence concerning thi	s matter to:			
	Caroline Quig	ley				
		Contact Person				
	Inc. Plan (USA	a)				
		Firm/Company	,,,,			
	20C Trolley S	quare				
		Address				
	Wilmington, E	DE 19806				
		City, State and Zip Cod	e			
	cquigley@incp	lan.net				
E	E-mail address: (t	to be used for future annual	ual report notif	ication)		
For fur	ther information	concerning this matter,	•			
Carolir	ne Quigley		_at () 428-1	200	
	Name of Co	ontact Person	Area	Code and	Daytime Telephone Number	
Enclos	ed is a check for	the following amount:				
\$10 .	5.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Fi and Certified		\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
New F Division Clifton 2661 E	ET ADDRESS: ilings Section on of Corporation Building executive Center assee, FL 32301			New F Division P. O. E	ilings Section on of Corporations Box 6327 assee, 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 filling of this Certificate of Conversion	on is:
Joli Properties LLC	_
Enter Name of Other Business Entity	-300 2
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.)	2015 AUG - 3
first organized, formed or incorporated under the laws of Florida	14 2
(Enter state, or if a non-U.S. entity, the name of the country)	
February 13, 2014	第7.
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 w organized, formed or incorporated:	
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:	
Joli Properties 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 Department of State; AND 2) must be the same as the effective date listed in the attached Articles of if an effective date is listed therein.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date listed as the document's effective date on the Department of State's records.	Incorporation,

Signed thisday of	, 20 15 .			
Required Signature for Florida Profit Corporation:				
	er, or, if Directors or Officers have not been selected, an			
Required Signature(s) on behalf of Other Business I	Entity: [See below for required signature(s).]			
Signature:	>			
Printed Name: Solimine Ltd by John Solimine Signature:	Title:			
Signature:				
Printed Name: 609271N.B. Inc. by Linda Solimine	Title: Member			
Signature:				
Printed Name:				
Signature:				
Printed Name:	Title:			
Signature:	A Milana and Branch			
Printed Name:	Title:			
Signature:				
Printed Name:				
If Florida General Partnership or Limited Liability Signature of one General Partner.	Partnership:			
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.				
Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)			

Page 2 of 2

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corpora ARTICLE II PRI	NCIPAL OFFICE		
5 Wideman B	Principal street address	N	Mailing address, if different is:
	Canada N1E 0J2		
Gueipii, Oiv C	Janada NTE 032		
·			
ARTICLE III PUR The purpose for which	POSE the corporation is organized is: to enga	ge in real e	estate and all other
lawful busines	SS.		
			201
			200
			23. 4
			→ 12 · · · · · · · · · · · · · · · · · ·
ARTICLE IV SHA The number of shares of	ares stock is:_1000		3r -
ARTICLE V INI	TIAL OFFICERS AND/OR DIRECTOR		or!
			jr: →
ARTICLE V INT	TIAL OFFICERS AND/OR DIRECTOR Linda Solimine Director	Name and Title:_	jr: →
ARTICLE V INT	TIAL OFFICERS AND/OR DIRECTOR Linda Solimine Director 5 Wideman Blvd	Name and Title:_	jr: →
Name and Titl Address	TIAL OFFICERS AND/OR DIRECTOR Linda Solimine Director 5 Wideman Blvd Guelph, ON Canada N1E 0J2	Name and Title: Address:	jr: —
Name and Title Name and Title	Linda Solimine Director 5 Wideman Blvd Guelph, ON Canada N1E 0J2	Name and Title: Address: Name and Title:	jr: —
Name and Titl Address	TIAL OFFICERS AND/OR DIRECTOR Linda Solimine Director 5 Wideman Blvd Guelph, ON Canada N1E 0J2	Name and Title: Address: Name and Title:	jr: —
Name and Title Name and Title	Linda Solimine Director 5 Wideman Blvd Guelph, ON Canada N1E 0J2	Name and Title: Address: Name and Title:	jr: —
Name and Title Name and Title	Linda Solimine Director 5 Wideman Blvd Guelph, ON Canada N1E 0J2	Name and Title: Address: Name and Title:	jr: —
Name and Title Address Name and Title Address	Linda Solimine Director 5 Wideman Blvd Guelph, ON Canada N1E 0J2	Name and Title: Address: Name and Title: Address:	Jr:
Name and Title Address Name and Title Address	Linda Solimine Director 5 Wideman Blvd Guelph, ON Canada N1E 0J2	Name and Title: Address: Name and Title: Address: Name and Title:	Jr:

Name and	d Title:	Name and Title:
Address		Address:
ARTICLE VI The name and Fl	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of	f the registered agent is:
Name:	Northwest Registered Agent LLC	-
Address:	3030 N. Rocky Point Dr, STE 150A	\
	Tampa, FL 33607	-
ARTICLE VII	INCORPORATOR	
The name and ad	dress of the Incorporator is:	
Name:	Caroline Quigley	_
Address:	20C Trolley Square	
	Wilmington, DE 19806	- -
	ned as registered agent to accept service of process am familiar with and accept the appointment as reg	s for the above stated corporation at the place designated in gistered agent and agree to act in this capacity
10-6	Tom GloverAssistant Secreta	ary 7/30/2015
	Required Signature/Registered Agent	Date
document to the l	Department of State constitutes a third degree felon	,
	Required Signature/Incorporator	7/30/2015 Date
	Caroline Qui	igley/
	100	corpora von