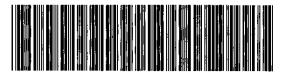
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(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
Con	/	

Office Use Only



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09/21/15--01041--005 **105.00



COVER LETTER

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

TO: Charter Section Division of Corporations
SUBJECT: Montechio Corp. Name of Resulting Florida Profit Corporation
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:
I-damia Moveland Contact Person
Aneiros of Accountants Co Firm/Company
85 Grand Canal Drive Site 406 Address
Migmi, FL 33144 City, State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tdania Hoveland at (786) 275-0044 Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
\$105.00 Filing Fees and Certificate of Status \$\int \frac{1}{3}\frac{113.75}{113.75} \text{ Filing Fees} and Certified Copy Status \$\int \frac{1}{3}\frac{113.75}{113.75} \text{ Filing Fees} And Certified Copy Status \$\int \frac{1}{3}\frac{122.50}{122.50} \text{ Filing Fees} And Certified Copy, and Certificate of Status
STREET ADDRESS:MAILING ADDRESS:New Filings SectionNew Filings SectionDivision of CorporationsDivision of Corporations

P. O. Box 6327

Tallahassee, FL 32314

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 Conve	ersion is:	:	
Montecchio, LLC	⋝ !८5		
Enter Name of Other Business Entity		S	rank lessily
1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Converged Montecchio, LLC Enter Name of Other Business Entity 2. The "Other Business Entity" is a Limited Lightlifty 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)	RETARY OF	SEP 21 PM	toraneo
first organized, formed or incorporated under the laws of	STATE	±: ⊃	THE STATE OF THE S
on 9/8/2015 Enter date "Other Business Entity" was first organized, formed or incorporated	A	ν	
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 organized, formed or incorporated:	of which	it is r	10W
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:	<u>.</u>		
Montecchio, Corp. 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 Department of State; AND 2) must be the same as the effective date listed in the attached Article if an effective date is listed therein.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this listed as the document's effective date on the Department of State's records	es of Inc	orpo	ration,

Signed this 16 day of September	,20 15				
Required Signature for Florida Profit Corporation:					
Signature of Chairman, Vice Chairman, Director, Office Incorporator: Aneros & Accountant Printed Name: Idania Morclay Title:	er, or, if Directors or Officers have not be	een selected, an			
Required Signature(s) on behalf of Other Business E					
Signature: Maelaw		_			
Printed Name: Idamia Marcland	Title: Incorporator	_			
Signature:		_			
Printed Name:	Title:				
Signature:		_ ZS: 			
Printed Name:		F-6-	200		
Signature:			THE STATE OF		
Printed Name: Signature:	Title:				
Signature		LONES LAIS LONES L			
Printed Name:		مسف			
Signature:					
Printed Name:					
If Florida General Partnership or Limited Liability Signature of one General Partner.	<u>Partnership:</u>				
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: 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)

The name of the corporation shall be: Mon-	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address 47.17 Sw 7.57 reet	Mailing address, if different is:
Suite 507-10	
Migmi, FZ 33126	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	, 1
	> 12 × 12 × 12 × 12 × 12 × 12 × 12 × 12
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	The state of the s
	36 A
	10A
ARTICLE IV SHARES	
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DI	RECTORS
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DI	RECTORS Name and Title:
ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/OR DI Name and Title: Claudio Sitzia C President Address: 4717 Sw 7 Stre	RECTORS Name and Title:
ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/OR DI Name and Title: Claudio Sitzia C President Address: 4717 Sw 7 Stre Suite 507-10 Mig.	RECTORS Name and Title: At Address: The Address of the Address
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DI Name and Title: C President Address: 4717 Sw 7 Stre Suite 507-10 Mig. Name and Title: Magin Macigs (Secretary)	RECTORS Name and Title:
ARTICLE IV SHARES The number of shares of stock is: DD ARTICLE V INITIAL OFFICERS AND/OR DI Name and Title: C audio Sitzia C President Address: 4717 Sw 7 Streen Suite 507-10 Mign Name and Title: Magin Macias Secretary Address: 4717 Sw 751red Suite 507-10 Suite 507-10	RECTORS Name and Title: Address: Name and Title: Address: Address:
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DI Name and Title: C President Address: 4717 Sw 7 Stre Suite 507-10 Mig. Name and Title: Magin Macigs (Secretary)	RECTORS Name and Title: Address: Name and Title: Address:

ARTICLE V	VI REGISTERED AGENT		
The <u>name an</u>	d Florida street address (P.O. Box NOT accepta	able) of the registered agent is:	
₁ Name: _	Idamia Horeland		
Address: _	85 Gyand Canal Drive	sude 40G	15 SE(
	Migmi, F2 33144		AHA ST T
ARTICLE 1	VII INCORPORATOR		SSE SE
The name an	d address of the Incorporator is:		F.C. 29 FF
Name: _	Aneiros & Accountants	20	PH 4: N9 OF STATE E. FLORIDA
Address: _	Aneiros & Accountants (85 Grand Canal Dr #4	106	
	MIAMI, FC 33144		
· ·	**************************************	•	
	Moreland	9/14/15 Date	_
	Required Signature/Registered Agent	Date	
	document and affirm that the facts stated herein the Department of State constitutes a third degre		
	Morelans	9/16/N	-
(K	equired Signature/Incorporator	, Da	ate