# 77/600000/532

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(en), case _ipe.e.,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SECRETARY OF STATE STATE

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#### **COVER LETTER**

TO: Charter Section Division of Corp	oorations				
SUBJECT: Carvechi Tec	hnology Corp.				
	Name of	Resulting Florida	Profit	Corporation	
The enclosed Certificate Entity" into a "Florida Pa				ees are submitted to convert an "Othe 15, F.S.	er Business
Please return all correspo	ondence concerning this	s matter to:			
Donald T. Carson			٠		
	Contact Person		-		
Carvechi Technology Corp	<b>).</b>				
	Firm/Company		<b>-</b>		
3409-B NW 72nd Avenue			_		
	Address				
Miami, Florida 33122			_		
,	City, State and Zip Code	2			
ivecchione@carvechi.com					
E-mail address: (to	be used for future annu	al report notifica	tion)		
For further information of	oncerning this matter,	please call:			
Ivette Vecchione		at (	887-0	625	
Name of Cor	ntact Person		ode and	Daytime Telephone Number	
Enclosed is a check for the	he following amount:				
	□\$113.75 Filing Fees and Certificate of Status	\$113.75 Filin and Certified Co		☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS: New Filings Section Division of Corporations Clifton Building 2661 Executive Center C			New F Division P. O. E	ING ADDRESS: illings Section on of Corporations Box 6327 assee, FL 32314	

Tallahassee, FL 32301

### 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:
Carvechi Technology LLC
(214- 005178) 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  (Enter state, or if a non-U.S. entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
January 10, 2014
Enter date "Other Business Entity" was first organized, formed or incorporated
The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
Carvechi Technology Corp.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: January 1, 2016
(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.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signed	thisday of	, 20_15	
Requir	ed Signature for Florida Profit Corporation	i	
Incorpo Printed Requir	re of Chairman, Vice Chairman, Director, Officerator:  Name: Donald T. Carson Title: Presidered Signature(s) on behalf of Other Business	ent	
	ire: * Cost Office		
Printed	Name: Donald T. Carson	Title: President/Officer	
Signatu	ire: Millin		
Printed	Name: Vecchione	Title: Officer	
Signatu	rre:		
Printed	Name:	Title:	
Signatu	ıre:		
Printed	Name:	Title:	
Signatu	ure:		
Printed	Name:	Title:	
Signatu	are:		
Printed	Name:	Title:	
	ida General Partnership or Limited Liability are of one General Partner.	Partnership:	
	ida Limited Partnership or Limited Liability ures of <u>ALL</u> General Partners.	Limited Partnership:	
	ida Limited Liability Company: re of a Member or Authorized Representative.		į
<u>All oth</u> Signatu	ers: are of an authorized person.		B PC SECRET
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)	PARY OF STATE

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

		اد. در
ARTICLE II PRINCIPAL OFFICE	•	
The principal place of business/mailing address is:		:: :::::::::::::::::::::::::::::::::::
Principal street address 3409-B NW 72nd Avenue	Mailing address, if different is:	:: <b>:</b> _
Miami, Florida 33122		_
ARTICLE III PURPOSE	<del> </del>	_
The purpose for which the corporation is organized		
The purpose of the corporation is to engage in any lawfu	al act of activity for which a corporation may be organized under	_
the General Corporation Law of the State of Florida other	er than the banking business, the trust company business or the	
practice of a profession permitted by the State of Florida	Corporations Code.	•
ARTICLE IV SHARES 1,000,000		
		<del></del>
The number of shares of stock is:	DIRECTORS	<del></del>
	R DIRECTORS  Name and Title:	_
The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR  Donald T. Carson / President	Ivette Vecchione / Director	_
The number of shares of stock is:	Name and Title:    Ivette Vecchione / Director   6 Ridgley Street	_
The number of shares of stock is:	Name and Title:    Ivette Vecchione / Director	- -
The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR  Name and Title:	Name and Title:  Address:  6 Ridgley Street  Hackettstown, NJ 07840  Name and Title:  Address:	i j
The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR  Name and Title:  Donald T. Carson / President  8520 SW 151st Street  Miami, FL 33158  Name and Title:	Name and Title:    Address:   Ivette Vecchione / Director	) ) )

ARTICL	E VI REGISTERED AGENT	
The name	and Florida street address (P.O. Box N	IOT acceptable) of the registered agent is:
Name:	Donald T. Carson	
Address:	8520 NW 151st Street	
	Miami, FL 33158	
ARTICL		
i ne <u>name</u>	and address of the Incorporator is:	
Name:	Ivette Vecchione	_
Address:	6 Ridgley Street	
	Hackettstown, NJ 07840	
this certifi	Required Signature/Registered Agent the document and affirm that the facts storthe Department of State constitutes a	**************************************
	Required Signature/Incorporator	Date