Polycoppay 6

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT M	AIL		
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status _			
Special Instructions to Filing Officer:			
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COVER LETTER

		,			•	
TO:	Charter Section Division of Co	rporations				
SHRU	ECT: ALPITRAL	DER L.L.C.				
SUBJ	EC1,	Name of	Resulting Flori	ida Profit	Corporation	
		te of Conversion, Article Profit Corporation" in ac				nvert an "Other Business
Please	return all corres	pondence concerning thi	s matter to:			
Jose A	A. Ramirez					
		Contact Person	 			
RS 16	02, Inc					
		Firm/Company				
1730 1	Main Street, Suite	200				
	1	Address				
Westo	on, FL 33326					
		City, State and Zip Cod	e			
jose.ra	mirez@taxcareinc	.com				
I	E-mail address: (1	to be used for future annu	ual report notifi	cation)		
For fu	rther information	concerning this matter.	please call:			
Jose A	. Ramirez		954 at (888-6	941	
	Name of Co	ontact Person		Code and	Daytime Telephone N	umber
Enclos	sed is a check for	the following amount:				
510	95.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Fil and Certified		#\$122.50 Filing Fees Certified Copy, and Certificate of Status	i,
New F Division	ET ADDRESS: Filings Section on of Corporation Building Executive Center			New F Division P. O. F	ilings Section on of Corporations 30x 6327 assee, FL 32314	FILL 15 DEC 29

Tallahassee, FL 32301

Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation

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15 DEC 29 PH 3.55

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:
ALPITRADER L.L.C.
Enter Name of Other Business Entity 13000019154
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
February 6, 2013
on 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: N/A
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
Alessandro Pizzitelli, P.A.
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 Floric Department of State; <u>AND</u> 2) must be the same as the effective date listed in the attached Articles of Incorporatio 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 this day of	. 20 15	
Required Signature for Florida Profit Corporation:		
Signature of Chairman Vice Chairman Director, Office Incorporator: Printed Name: Alessandro Pizzitelli Title: President	er, or, if Directors coeficers have not bee	n selected, an
Required Signature(\$) on behalf of Other Business I	Entity: [See below for required signature(s	s).]
Signature: Signaturers on behalf of Other Business I		
Printed Name: Alessandro Pizzitelli	Title: MGRM	-
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.	Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		5
All others: Signature of an authorized person.		FILL BEC 29
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)	ED 2.55

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

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The name of the corporation shall be: Alessandro Pizzitelli, P	P.A. 15 DEC 29 P	ष २.५
	TO WELLT OF	ar Or O.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	TO ETATION OF A LAND OF A LAND	914世 1.72世M
Principal street address 10925 NW 71st CT	Mailing address, if different is: 10925 NW 71st CT	
Parkland, FL 33076	Parkland, FL 33076	
ARTICLE III PURPOSE		
The purpose for which the corporation is organized is: Real Estate Sales		
	•	
ARTICLE IV SHARES The number of shares of stock is:		
ARTICLE V INITIAL OFFICERS AND/OR DIR	ECTORS	
Name and Title:	Name and Title:	
Address: 10925 NW 71st CT	Address:	
Parkland, FL 33076	Name and Title:	
Address:	Address:	
Name and Title:	Name and Title:	
Address:	Address:	

ARTICL	E VI REGISTERED A	GENT		
The name	and Florida street addres	(P.O. Box NOT acceptable) of t	he registered agent is:	
Name:	Jose A, Ramirez			
Address:	1730 Main Street, Suite 200	1		
	Weston, FL 33326			
<u>ARTICL</u>	E VII INCORPORA	<u>ror</u>		
The name	and address of the Incorpo	orator is:		
Name:	Alessandro Pizzitell∳			
Address:	10925 NW 71st CT			
	Parkland, FL 33076			
******	*********	*********	*****	
			or the above stated corporation at the place de Stered agent and agree to act in this capacity	signated in
7	I have	/Jose A. Ramirez	12-18-15	
	Required Signature/Regis	tered Agent	Date	
			e. I am aware that any false information sul as provided for in s.817.155, F.S.	mitted in a
	the extrapell	/Alessandro Pizzitelli	12.13.15	
/ "	Required Signature/Incorp	porator	Dat.	