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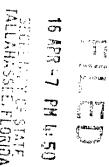
(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT N	1AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	
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COVER LETTER

TO:	Charter Section Division of Con					
CHIDI	ECT. ENTERPR	ISE FLEET FINANCE IN				
SODJ	ECT:	Name of	Resul	ting Flo	rida Profit	Corporation
		te of Conversion, Articles Profit Corporation" in ac				ees are submitted to convert an "Other Business 15, F.S.
Please	return all corresp	pondence concerning this	matt	er to:		
		LUZ MONTOYA				
		Contact Person				
ACC	URATE TAX RET	TURNS AND ACCOUNTI	NG SI	ERVICES	S IN:	
		Firm/Company				•
103	244 E COLONIAL	. DR. STE 113				
		Address				
O	RLANDO, FL 328	17				
		City, State and Zip Code				
luz.acc	curatetax@gmail.co	om ·				
- E	E-mail address: (t	o be used for future annu	al rep	oort noti	fication)	
For fu	rther information	concerning this matter,	olease	e call:		
LUZ	Z MONTOYA		at (107	985-2	513
	Name of Co	ontact Person	(_	Area	a Code and	Daytime Telephone Number
Enclos	sed is a check for	the following amount:				
□ \$10	5.00 Filing Fees	■\$113.75 Filing Fees and Certificate of Status		13.75 F		☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status
New F Division Cliftor 2661 F	ET ADDRESS: Tilings Section on of Corporation on Building Executive Center assee, FL 32301				New F Division P. O. E	ING ADDRESS: illings Section on of Corporations Box 6327 assee, 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 Con	version	is:	
ENTERPRISE FLEET FINANCE LLC			
Enter Name of Other Business Entity		(J)	4785°°5
2. The "Other Business Entity" is aLIMITED LIABILITY COMPANY	3 - 27 3 - 77	NO.	SAMPHONE
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)		-7 PH	TO PERSONAL PROPERTY OF THE PERSONAL PROPERTY
first organized, formed or incorporated under the laws of	<u></u>		A SHOWER SHOP
(Enter state, or if a non-U.S. entity, the name of the country)	AUNOT.	F: 50	II. MANNET III
02/25/2016 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 organized, formed or incorporated:	of whi	ch it is	s now
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation	<u>ı:</u>		
ENTERPRISE FLEET FINANCE INC			
Enter Name of Florida Profit Corporation			
5. If not effective on the date of filing, enter the effective date: 02/25/16.			
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is Department of State; <u>AND</u> 2) must be the same as the effective date listed in the attached Artic if an effective date is listed therein.)			oration,
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, thi			

Signed thisday ofAPRIL	, 20		
Required Signature for Florida Profit Corporation:			
Signature of Chairman, Vice Chairman, Director, Office Incorporator: Printed Name: DANIEL E. FERNANDEZ Title: PRESID	er, or, if Directors or Officers have not been	n selected, an	
Required Signature(s) on behalf of Other Business E).]	
Signature: X Carriel Ferran	lec/		
Printed Name: DANIEL E. FERNANDEZ	Title: MEMBER		
Signature:			
Printed Name:	Title:		
Signature:		₩ ₀ ,	
Printed Name:	Title:		G Pengan
Signature:		R-7	र व्यक्तिकार हुक्तिम्हरू
Printed Name:	Title:		FTI
Signature:		STAT	O DE CHICATO
Printed Name:	Title:	DA	
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 <u>ALL</u> General Partners.	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)

ARTICLE	PRINCIPAL OFFICE	
	place of business/mailing address is:	
	Principal street address	Mailing address, if different is:
7108 OVER	RLAND ROAD	3216 CURRY FORD
ORLANDO	o, FL 32810	ORLANDO, FL 32822
	I PURPOSE	
The purpose f	or which the corporation is organized is:	in t
		6 APR -7 PH 4: 50 ELLAHASSEE, FLORIDA
ARTICLE IN	Y SHARES I shares of stock is:	
The number of		
The number of	f shares of stock is:	
The number of	f shares of stock is:	<u>ECTORS</u>
The number of ARTICLE V Name and Tit	f shares of stock is:	ECTORS Name and Title:
The number of ARTICLE V Name and Tit Address:	f shares of stock is: 1000 COMMON INITIAL OFFICERS AND/OR DIR FERNANDEZ, DANIEL E. PRESIDENT 3216 CURRY FORD	Name and Title: Address:
The number of ARTICLE V Name and Tit Address:	f shares of stock is: 1000 COMMON INITIAL OFFICERS AND/OR DIR FERNANDEZ, DANIEL E. PRESIDENT 3216 CURRY FORD ORLANDO, FL 32822	Name and Title: Address:
The number of ARTICLE V Name and Tit Address: Name and Tit Address:	f shares of stock is: 1000 COMMON INITIAL OFFICERS AND/OR DIR FERNANDEZ, DANIEL E. PRESIDENT 3216 CURRY FORD ORLANDO, FL 32822	Name and Title: Address: Name and Title:

Jame:	LUZ MONTOYA				
ddress:	10244 E COLONIAL DR. STE 113		TALL SEC	16	医共命性细胞
	ORLANDO, FL 32817			APR -	d d
RTICL	E VII INCORPORATOR		SE S	7 PM	t.
he <u>name</u>	and address of the Incorporator is:		<u>n</u> 50		1 1 1
lame:	DANIEL E. FERNANDEZ		ONE CINSO	<u> </u>	The state of the s
ddress:	3216 CURRY FORD		> "	***	
	ORLANDO, FL 32822				
	ORLANDO, FL 32822 *********************************				ignated in
	**************************************	t as registered agent and agree to act in			ignated in
his certifi	**************************************	t as registered agent and agree to act in 04-01-2016 Date n are true. I am aware that any false in	this capac - nformation	eity	

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