P16000037022

| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ad | Idress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | ısiness Entity Nan | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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| | | c |

Office Use Only



600284213566

04/11/16--01042--025 **122.50

N6-27819



COVER LETTER

TO: Charter Section

Tallahassee, FL 32301

| . Division of Co | rporations | | | |
|--|---|--------------------------------------|------------------------------|--|
| SUBJECT: Symmetry (| Coffee Corp | | | |
| SUBJECT: | | Resulting Florida P | rofit C | Corporation |
| | e of Conversion, Article Profit Corporation" in ac | | | es are submitted to convert an "Other Business 5, F.S. |
| Please return all corresp | pondence concerning thi | s matter to: | | |
| Ted Linn | | | | |
| | Contact Person | | | |
| Symmetry Coffee & Crê | pes | | | |
| | Firm/Company | | | |
| 4262 NW 4th Cir | | | | |
| | Address | | | |
| Ocala, FL 34475 | | | | |
| | City, State and Zip Cod | e | | |
| tedlinn24@gmail.com | | | | |
| E-mail address: (t | o be used for future annu | ual report notification | on) | |
| For further information | concerning this matter, | please call: | | |
| Ted Linn | | _at () | 525-326 | 68 |
| Name of Co | ontact Person | Area Cod | e and | Daytime Telephone Number |
| Enclosed is a check for | the following amount: | | | |
| □ \$105.00 Filing Fees | □\$113.75 Filing Fees and Certificate of Status | □\$113.75 Filing I and Certified Cop | у | ■\$122.50 Filing Fees, Certified Copy, and Certificate of Status |
| STREET ADDRESS: New Filings Section Division of Corporation Clifton Building 2661 Executive Center | | N D P. | ew Fil ivisior . O. Bo | NG ADDRESS: ings Section of Corporations ox 6327 ssee, FL 32314 |



April 14, 2016

TED LINN 4662 NW 4TH CIR OCALA, FL 34475

SUBJECT: SYMMERTRY COFFEE CORP

Ref. Number: W16000027819

We have received your document for SYMMERTRY COFFEE CORP and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a chairman, vice chairman, director, officer, or an incorporator, if directors or officers have not been selected.

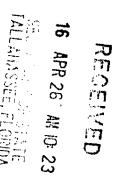
The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch Regulatory Specialist II

Letter Number: 716A00007751



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 Conv | version is | : |
|--|------------|-----------------|
| Symmetry Coffee Corp | | |
| Enter Name of Other Business Entity | | |
| 2. The "Other Business Entity" is a C-Corp | | |
| (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 | 7 N | Liverium) |
| (Enter state, or if a non-U.S. entity, the name of the country) January 8, 2016 | | A CONTRACT TO A |
| Enter date "Other Business Entity" was first organized, formed or incorporated | | Paris India |
| 3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws organized, formed or incorporated: | > | it is now |
| South Carolina | | |
| 4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> | <u>:</u> | |
| Symmetry Coffee Corp | | |
| Enter Name of Florida Profit Corporation | | |
| 5. If not effective on the date of filing, enter the effective date: January 8, 2016 | | |
| (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 Article if an effective date is listed therein.) | | |
| <u>Note:</u> 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. | date wil | not be |
| nated as the document a effective date off the Department of State a records. | | |

| Signed this 4 day of March April | , 20 | |
|---|---|-----------------------|
| Required Signature for Florida Profit Corporation: | | |
| Signature of Chairman, Vice Chairman, Director, Office Incorporator: Cherie F Linn Printed Name: Cherie F Linn Title: Preside | cer, or, if Directors or Officers have not bee | en selected, an |
| Required Signature(s) on behalf of Other Business | Entity: [See below for required signature(| s).] |
| Signature: Med Hum | | - |
| Printed Name: Cherie F. Linn | Title: President | _ |
| Signature: | · · · · · · · · · · · · · · · · · · · | _ |
| Printed Name: | Title: | - |
| Signature: | | - <u>P</u> |
| Printed Name: | Title: | |
| Signature: | | Comment of the second |
| Printed Name: | Title: | P P |
| Signature: | | |
| Printed Name: | Title: | - |
| Signature: | | _ |
| Printed Name: | Title: | - |
| If Florida General Partnership or Limited Liability Signature of one General Partner. | | |
| 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. | | |
| All others: Signature of an authorized person. | | |
| Fees: Certificate of Conversion: | \$35.00 | |
| Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status: | \$70.00 \$8.75 (Optional) \$8.75 (Optional) | |

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

| ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Principal street address Mailing address, if different is: 4262 NW 4th Cir Ocala, FL 34475 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Specialty coffee shop and Crépery. Symmetry coffee Corp will purchase, roast, brew, and sell fresh coffee through retail and wholesale platforms. We will make and prepare fresh gournet crepes, pastries and other prepared food and beverages for public consumption. ARTICLE IV SHARES The number of shares of stock is: MARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Name and Title: Name and Title: | The name of the corporation shall be: Symmetry Coffee C | Corp |
|--|---|--|
| The principal street address | • | |
| Principal street address Mailing address, if different is: 4262 NW 4th Cir Ocala, FL 34475 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Specialty coffice shop and Crepery. Symmetry coffee Corp will purchase, roast, brew, and sell fresh coffee through retail and wholesale platforms. We will make and prepare fresh gourmet crepes, pastries and other prepared food and beverages for public consumption. ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Name and Title: Name and Title: Address: Address: Name and Title: | | |
| 4262 NW 4th Cir Ocala, FL 34475 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Specialty coffce shop and Crépery. Symmetry coffce Corp will purchase, roast, brew, and sell fresh coffee through retail and wholesale platforms. We will make and prepare fresh gourmet crepes, pastries and other prepared food and beverages for public consumption. ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Name and Title: Address: Name and Title: Address: Name and Title: | | |
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| wholesale platforms. We will make and prepare fresh gournet crepes, pastries and other prepared food and beverages for public consumption. ARTICLE IV SHARES The number of shares of stock is: 500000 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Name and Title: Name and Title: Name and Title: Address: Address: Address: Name and Title: | The purpose for which the corporation is organized is: | |
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| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Name and Title: Address: Name and Title: Name and Title: Address: Name and Title: | | |
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| Name and Title:Name and Title: | Address: | Address: |
| | | Name and Title: |
| Address: Address: | | |
| | Address: | Address: |

| | E VI REGISTERED AGENT | |
|----------------------|--|---|
| The <u>name</u> | e and Florida street address (P.O. Box NOT | acceptable) of the registered agent is: |
| Name: | Ted G Linn | |
| Address: | 4262 NW 4th Cir | |
| | Ocala, FL 34475 | |
| ARTICL | E VII INCORPORATOR | |
| The name | e and address of the Incorporator is: | |
| Name: | Cherie F Linn | COS No Secure |
| Address: | 4262 NW 4th Cir | |
| | Ocala, FL 34475 | |
| ******* Having be | ************************************** | ******* ice of process for the above stated corporation at the place designated in |
| | | intment as registered agent and agree to act in this capacity |
| | Required Signature/Registered Agent | 04/21/16 Date |
| | | d herein are true. I am aware that any false information submitted in a ed degree felony as provided for in s.817.155, F.S. |
| | here of Sinn | 04/04/16 |
| | Required Signature/Incorporator | l Date |