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(Re	questor's Name)	··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ··		
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
Special Instructions to Filing Officer:				

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MAY / 2016) S. GILBERT



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 28, 2016

SERGEY SLASTIKHIN 17070 COLLINS AVE STE 260 SUNNY ISLES BEACH, FL 33160

SUBJECT: ES IT EVOLUTION INC Ref. Number: W16000031646

We have received your document for ES IT EVOLUTION INC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return the corrected original and one copy of 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.

Sylvia Gilbert Regulatory Specialist II New Filing Section

Letter Number: 416A00008889

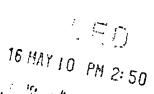
Certificate of Conversion

· For

"Other Business Entity"

Into

Florida Profit Corporation



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:
ES IT EVOLUTION LLC
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 FLORIDA
(Enter state, or if a non-U.S. entity, the name of the country)
04/04/2016 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 of which it is now organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u> ES IT EVOLUTION INC
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: Output Output
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 this 18. day of APRIL	, 20
Required Signature for Florida Profit Corporatio	
Signature of Chairman, Vice Chairman, Of Incorporator: Printed Name: SERGEY SLASTIKHIN Title: MGR	ficer, or, if Directors or Officers have not been selected, an
Required Signature(s) on behalf of Other Busines	s Entity: [See below for required signature(s).]
Signature:	
Printed Name: Sergey Slastikhir	2_Title: Officer
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 Liabili Signature of one General Partner.	ity Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	tv Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative	3.
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 Chapte	607 and/or Chapter 621, F.S. (Profit)
ARTICLE I The name of the	NAME corporation shall be:	16 MAY 10 PM 2: 50
	PRINCIPAL OFFICE	All Brandstin Pt O. All
The principal pl	ace of business/mailing address is:	3.5.1(1.1
17070 COLLIN	Principal street address S AVE STE 260	Mailing address, if different is:
SUNNY ISLES	BEACH FL 33160	
ARTICLE III	PURPOSE	
	r which the corporation is organized is:	
ALL LAWFUL	L BUSINESS	
ARTICLE IV	SHADES	
The number of	shares of stock is:	
APTICIE V	INITIAL OFFICERS AND/OR DIF	ictors
ARTICLE V	SERGEY SLASTIKHIN/ OFFICER	
Name and Title		Name and Title:
Address:	17070 COLLINS AVE STE 260	Address:
	SUNNY ISLES BEACH FL 33160	
Name and Title	PAVEL BONDAR / MANAGER	Name and Title:
Address:	16909 N BAY ROAD APT 206	Address:

Address:

Name and Title:

SUNNY ISLES BEACH, FL 33160

Name and Title:_____

Address:

<i>ARTICL</i> The <u>name</u>	<i>E VI <u>REGISTERED AGENT</u></i> e and Florida street address (P.O. Box NOT acceptable	ole) of the registered agent is:	
Name:	SLASTIKHIN, SERGEY		
Address:	17070 COLLINS AVENUE STE 260		
	SUNNY ISLES BEACH, FL 33160		
ARTICL			
The <u>name</u>	e and address of the Incorporator is:		
Name:	SLASTIKHIN, SERGEY		
Address:	17070 COLLINS AVENUE STE 260		
	SUNNY ISLES BEACH, FL 33160		
******* Having be this certifi	**************************************	**************************************	ignated in
J	-AA	04/18/2016	
	Required Signature/Registered Agent	Date	
	this document and affirm that the facts stated herein t to the Department of State constitutes a third degree	are true. I am aware that any false information subn felony as provided for in s.817.155, F.S.	nitted in a
		04/18/2016	
-	Required Signature/Incorporator	Date	