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(Requestor's Name)			
· (Address)			
(Address)			
State/Zip/Phone #)	· · · · · · · · · · · · · · · · · · ·		
WAIT	MAIL		
(Business Entity Name)			
(Document Number)			
Certificates of	Status		
Special Instructions to Filing Officer:			
	ess) State/Zip/Phone #) WAIT ess Entity Name) ment Number) Certificates of		

Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 12, 2016

ERICA GUIMARAES 6103 NW 41ST DR CORAL SPRINGS, FL 33067

SUBJECT: E & COMPANY, INC. Ref. Number: W16000035130

We have received your document for E & COMPANY, 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):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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.

Jessica A Fason Regulatory Specialist II

Letter Number: 616A00010087

COVER LETTER

TO: Charter Section Division of Corporations
SUBJECT: For Company Inc. Name of Resulting Florida Profit Corporation
The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.
Please return all correspondence concerning this matter to:
Erica Guimaraes Contact Person
E 2 Company, LLC. Firm/Company
GIO3 NW 41st Drive
Coral Springs, FL 33067 City, State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
\$105.00 Filing Fees and Certificate of and Certified Copy Status \$113.75 Filing Fees and Certified Copy and Certificate of Status \$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: New Filings Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filings Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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:
Enter Name of Other Business Entity
2. The "Other Business Entity" is a Limited Liability Company, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of Floride (Enter state, or if a non-U.S. entity, the name of the country)
on CG. 1Q. 2014 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 attached Articles of Incorporation: 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 Florid 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.

Page 1 of 2

Signed this 28 day of Ayric	
Required Signature for Florida Profit Corporation	<u>1:</u>
Signature of Chairman, Vice Chairman, Director, Off Incorporator: Printed Name: Fricu Guimarges Title: Pro-	icer, or, if Directors or Officers have not been selected, an
Required Signature(s) on behalf of Other Business	Entity: [See below for required signature(s).]
Signature:	
Printed Name: WICO GUIMARUE	S Title: Manager
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 Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y 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)

The name of the corporation shall be: \(\sum_{\text{Q}} \in \text{Q} \)	ompany, Inc.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	•
Principal street address	Mailing address, if different is:
6103 NW 41st Drive	
Coral springs, Fr	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
Property managemen	<u></u>
ARTICLE IV SHARES The number of shares of stock is: 1 (ove)	
ARTICLE V INITIAL OFFICERS AND/OR DIRE	
Name and Title: Erica Guirnaraes, Perondent	Name and Title:
Address: 6103 NN 41st Duve	Address:
Coral Springs, PL 33007	
Name and Title:	Name and Title:
Address:	Address:
Name and Title:	Name and Title:
Address	Address:

	e and Florida street address (P.O. Box NOT acceptable	e) of the registered agent is:
Name:	Erica Guimaraes	
Address:	6103 NW 41st DWC	
	Coral Springs, FL 33007	
ARTICLI The name	E VII INCORPORATOR and address of the Incorporator is:	
Name:	Erica Guimarges	
Address:	G103 NW 4st Dive	
	Coral Springs, Fr 33067	
Having be	************************************* een named as registered agent to accept service of producte, I am familiar with and accept the appointment as Required Signature/Registered Agent	cess for the above stated corporation at the place designated in
I submit t document	this document and affirm that the facts stated herein a to the Department of State constitutes a third degree f	re true. I am aware that any false information submitted in a felony as provided for in s.817.155, F.S.
Marine and Marine and Marine and Marine	Lust.	04/28/2016
	Required Signature/Incorporator	Date

, ...