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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
STATE OF STATE

W6-044837

08/24/16



June 23, 2016

CAROLYN EKHOFF 391 N.W. 108TH AVE. PLANTATION, FL 33324

SUBJECT: EKHOFF BROS. INC. Ref. Number: W16000044837



We have received your document for EKHOFF BROS. 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.

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.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 016A00013198

COVER LETTER

TO:	Charter Section Division of Corpora	ations	77	_	
SUBJ	ECT:	EXHOF	F Bros.	INC.	
		Name of I	Resulting Florida	Profit Corp	oration
	nclosed Certificate of " into a "Florida Profi				re submitted to convert an "Other Business".S.
Please	return all correspond	lence concerning this	matter to:		
	CAROWA				
		Contact Person			
	EKHPFF	BLOS. INC.			
		Firm/Company			
	391 NW	1087H AVE Address			
		Address			
	PLANTO	TION FL y, State and Zip Code	. 33324		
	City	, State and Zip Code	2		
		off cyahoc			
]	E-mail address: (to be	used for future annu	al report notificat	tion)	
For fu	rther information con	cerning this matter, p	please call:		
	CAROLVIN	EKHOFF	at (815	713	5-7275
-	Name of Contac			/	ytime Telephone Number
Enclo	sed is a check for the	following amount:			
\$ 10		\$113.75 Filing Fees d Certificate of atus	□\$113.75 Filing and Certified Co	ру Се	S122.50 Filing Fees, rtified Copy, and rtificate of Status
New I Divisi	EET ADDRESS: Filings Section on of Corporations n Building			New Filing	Corporations

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

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 Conversion is:	
EKHOFF BROS. INC.	
Enter Name of Other Business Entity	
2. The "Other Business Entity" is a S COLP.	
(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	
(Enter state, or if a non-U.S. entity, the name of the country) 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 norganized, formed or incorporated: 4. The name of the Florida Profit Corporation or get forth in the attached Articles of Incorporation.	
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u> EXHOFF BLOG. INC.	
Enter Name of Florida Profit Corporation	
5. If not effective on the date of filing, enter the effective date: UIS 206. (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the F	

Page 1 of 2

gned this 13 day of June 20 16.	
gnature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selector of Chairman, Vice Chairman, Director, or, if Directors or Officers have not been selector of Chairman, Vice Chairman, Director, or, if Directors or Officers have not been selectors or Officers have not been sele	ected, an
equired Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]	
gnature:	
inted Name: MARLON EXHOFF Title: PRESIDENT	
gnature:	
inted Name:Title:	
gnature:	
inted Name:Title:	
gnature:	
inted Name:Title:	
gnature:	
inted Name:Title:	
gnature:	
inted Name:Title:	
Florida General Partnership or Limited Liability Partnership: gnature of one General Partner.	
Florida Limited Partnership or Limited Liability Limited Partnership: gnatures of ALL General Partners.	-

If Florida Limited Liability Company:
Signature of a Member or Authorized Representative.

Signature of an authorized person.

Fees:

Certificate of Conversion:

\$35.00

Fees for Florida Articles of Incorporation:

\$70.00

\$8.75 (Optional)

Certified Copy: Certificate of Status:

\$8.75 (Optional)

Page 2 of 2

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

ARTICLE I NAME The name of the corporation shall be:	OFF BROS. INC.	HANKE 16 A
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:		AUG 22
Principal street address EKHOFF BLOG. INC.	Mailing address, if different is:	AM 9: 34
391 NW 1081 AVE		31- NOR
PLANTATION FL. 33324		<i>(</i>)
The purpose for which the corporation is organized is: Direct Marketing by	VSINESS	
· · · · · · · · · · · · · · · · · · ·		
ARTICLE IV SHARES The number of shares of stock is:	00	_
ARTICLE V INITIAL OFFICERS AND/OR DIRE	ECTORS	
Name and Title: MARLON EXHATE - PRES	Name and Title:	
Address: 391 NW 108TH AVE	Address:	
PLANTATION, FL 3336	પ્પ	
Name and Title:	Name and Title:	
Address:	Address:	
Name and Title:	Name and Title:	
Address:	Address:	

Address: 341 NW 10874 AVE LANTATION, 50. 33324 Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Landa La	ARTICLE	VI REGISTERED AGENT
Address: 34 NW 108TH AVE VANTATION FL 333244 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: MAGUON ECHOFF Address: 34 NW 108TH AVE I VANTATION FL 333244 Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Was a submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	The name a	and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: MAGUON ECHOPE Address: 341 NW 10814 AVE	Name:	MARLON EXHOFF
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: MAGUON EXHIPTE Address: 341 NW 108TH AVE LUNTATION, To. 3333H ********************************	Address:	341 NW 10874 AVE
The name and address of the Incorporator is: Name: MAHON EXHORE Address: 341 NW 10874 AVE LANTATION		PLANTATION, FL. 33324
Name: MAJLON EXHORE Address: 341 NW 108TH AVE LYNTATION, Ft. 33324 Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Required Signature/Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	ARTICLE	VII INCORPORATOR
Address: 341 NW 10874 AVE LANTATON, FL. 333244 Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Landam	The name a	and address of the Incorporator is:
**************************************	Name:	MARLON EXHOFF
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Required Signature/Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	Address:	391 NW 108TH AVE
this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Colored Signature/Registered Agent Colored Signature/Registered Agent Date		PLANTATION, Fr. 33324
this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Colored Signature/Registered Agent Colored Signature/Registered Agent Date		
this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Colored Signature/Registered Agent Colored Signature/Registered Agent Date	*****	*************
I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	**	
I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	V	Required Signature/Registered Agent Date
		is document and affirm that the facts stated herein are true. I am aware that any false information submitted in a
	document t	to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.
1 / 1 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 /	Y	Vala Ehl/ 6-13-16'
Required Signature/Incorporator Date		