## P10000078193

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DEPARTMENT OF STATE

C. GOLDEN SEP 2 6 2016

## SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724 SUNSHINECORPORATE2014@GMAIL.COM

Date: 9-23-16
ENTITY NAME:
VIBRASYSTEMS, LLP
)
**PLEASE FILE THE ATTACHED AND RETURN:**
Plain Copy
Certified Copy
**PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY:**  Document Number:  Certified Copy of Arts & Amendments  Certificate of Good Standing
**APOSTILLE'/NOTARIAL CERTIFICATION:** COUNTRY OF DESTINATION NUMBER OF CERTIFICATES REQUESTED
TOTAL AMOUNT OWED: 10 105  CHECK NUMBER: 2888  PLEASE CONTACT TINA AT 850-508-1891 FOR ANY PROBLEMS OR INFORMATION ON THIS MATTER.  Thank you!  Tina Goff, President

## Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation

FILED

16 SEP 23 AM 9 30

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:
VIBRASYSTEMS, LLP
Enter Name of Other Business Entity
2. The "Other Business Entity" is alimited liability partnership
(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)
April 14, 2015
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> VIBRASYSTEMS, INC.
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 Floric Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporatio 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.

1	· · · · · · · · · · · · · · · · · · ·	
Signed thisday of	, 20	
Required Signature for Florida Profit Corporation:		
Signature of Chairman, Vice Chairman, Director, Office	er, or, if Directors or Officers have not been	selected, an
Incorporator:  Printed Name: Fima Dreff Title: Presiden	nt	
Required Signature(s) on behalf of Other Business F	Entity: [See below for required signature(s).	]
Signature:		
Printed Name: Fima Dreff	Title: General Partner	
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 Liability Signature of one General Partner.	Partnership:	
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.		10
All others: Signature of an authorized person.		
Fees:  Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Conve	\$35.00 \$70.00 \$8.75 (Ontional)	FILED EP 23 M 9
Certified Copy: Certificate of Status:	\$8.75 (Optional) \$8.75 (Optional)	့္ကုန္က် ည

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

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9:30

The name of the corporation shall be:			16	SEP ——	د ۲	$E_0$
ARTICLE II PRINCIPAL OFFICE						
The principal place of business/mailing address is:			•		•	•
Principal street address 5700 Taylor Road,Unit A-3		Mailing address, if di	fferent i	s:		
Naples FL 34109						-
ARTICLE III PURPOSE	<u></u> ,					-
The purpose for which the corporation is organized is:						
Any or all lawful purposes						
						•
	<del></del>		<del></del> -			•
	<del>-</del>					-
						-
					<del></del>	-
ARTICLE IV SHARES 100						
ARTICLE IV SHARES The number of shares of stock is:						-
	CTORS				_	
The number of shares of stock is:	CTORS  Name and Titl	Raya Dreff, Director/e:	V.Presio	lent/Se	ecretar	<u> </u>
The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR DIRE  Fina Dreff Director, President/Tressurer		e: 5700 Taylor Road,Un		lent/Se	ecretar	у —
The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR DIRE  Name and Title:  Fima Dreff, Director, President/Treasurer  5700 Taylor Road Unit A-3	Name and Titl	e:		dent/Se	ecretar	у —
The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR DIRE  Name and Title:  Fima Dreff, Director, President/Treasurer  Address:  Naples, FL 34109	Name and Titl	5700 Taylor Road,Un Naples, FL 34109	it A-3			
The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR DIRE  Name and Title:  Fima Dreff, Director, President/Treasurer  Address:  Naples, FL 34109  Name and Title:  Address:	Name and Titl Address: Name and Titl	e:5700 Taylor Road,Ur Naples, FL 34109 e:	it A-3			
The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR DIRE  Name and Title:  Fima Dreff, Director, President/Treasurer  Address:  Naples, FL 34109	Name and Titl	5700 Taylor Road,Un Naples, FL 34109	it A-3			
The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR DIRE  Name and Title:  Fima Dreff, Director, President/Treasurer  Address:  Naples, FL 34109  Name and Title:  Address:	Name and Titl Address: Name and Titl Address:	e:5700 Taylor Road,Ur Naples, FL 34109 e:	it A-3			
The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR DIRE  Name and Title:  Fima Dreff, Director, President/Treasurer  Address:  Naples, FL 34109  Name and Title:  Address:	Name and Titl Address: Name and Titl Address:	e:5700 Taylor Road,Ur Naples, FL 34109 e:	it A-3			

77	E VI REGISTERED AGENT	
ine <u>name</u>	and Florida street address (P.O. Box NOT	acceptable) of the registered agent is:
Name:	Cohen & Grigsby PC/Thad Kirkpatrick, Esq.	
Address:	9110 Strada Place, Ste.6200	
	Naples, FL 34108	
ARTICL		
i ne <u>name</u>	and address of the Incorporator is:	
Name:	Fima Dreff	
Address:	5700 Taylor Road, Unit A-3	
	Naples FL 34109	
********* Having be	**************************************	**************************************
P		intment as registered agent and agree to act in this capacity  1-23-16  Date
	Required Signature/Registered Agent this document and affirm that the facts state	^

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