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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 OCT 31 AM 9:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: ROJUSTLURA CORP.

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:

J.D. MACK

Contact Person

TAX-MACK USA INC.

Firm/Company

9820 NW 7th AVE

Address

MIAMI, FLORIDA 33150

City, State and Zip Code

TAXMACK9820 @GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

J. D. MACK

at (305) 693-5195

Name of Contact Person

Area Code 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 Fees and Certified Copy ☐ \$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

FILED
OCT 31 AM 9:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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:

RORALU LLC

Enter Name of Other Business Entity

2. The "Other Business Entity" is a LLC
(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)

on OCTOBER 14, 2016

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**:

ROJUSTLURA CORP.

Enter Name of Florida Profit Corporation

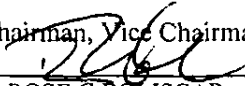
5. If not effective on the date of filing, enter the effective date: _____

(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida 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 21 day of OCTOBER, 2016.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: 

Printed Name: ROSE G BOLISCAR Title: PRES / SEC

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: 

Printed Name: LUC - ALBERT M. DUVAL Title: MGR

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 Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of **ALL** General Partners.

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:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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: ROJUSTLURA CORP.

18 OCT 31 AM 9:41

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal street address
2199 NW S RIVER DRIVE
MIAMI, FLORIDA 33125

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CARGO SHIPPING - TRANSPORTATION OF HEAVY GOODS AND MATERIALS FROM ONE PORT TO ANOTHER
FOR INDIVIDUALS AND BUSINESSES.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ROSE G BOLISCAR, PRES / SEC

Name and Title: _____

Address: 1151 EAST 57th STREET

Address: _____

BROOKLYN, NEW YORK 11234

Name and Title: JEAN F FORMULET, DIRECTOR

Name and Title: _____

Address: 5030 SW 150th STREET

Address: _____

MIRAMAR, FLORIDA 33027

Name and Title: LUC - ALBERT M. DUVAL, DIRECTOR

Name and Title: _____

Address: 15251 NW 18th AVE

Address: _____

MIAMI, FLORIDA 33162

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: ROSE G BOLISCAR
Address: 2199 NW S RIVER DRIVE
MIAMI, FLORIDA 33125

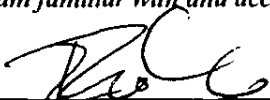
16 OCT 31 AM 9:42
3227 AVENUE OF THE
FALLS MIAMI, FLORIDA

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

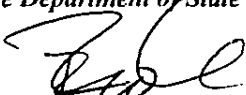
Name: ROSE G BOLISCAR
Address: 2199 NW S RIVER DRIVE
MIAMI, FLORIDA 33125

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

10/21/2016
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.


Required Signature/Incorporator

10/21/2016
Date