

P/6000 89095

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

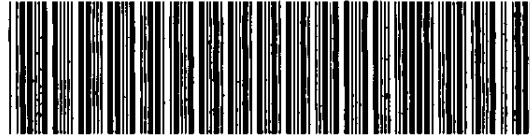
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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06/06/16--01038--015 \*\*105.00

M. MOON

OCT 28 2016

16 OCT 28 PM 3:37



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 9, 2016

BUSINESS FILINGS INCORPORATED  
8020 EXCELSIOR DRIVE, SUITE 200  
MADISON, WI 53717

SUBJECT: TEVIXMD CORPORATION  
Ref. Number: W16000042206

We have received your document for TEVIXMD CORPORATION 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P94000060810.

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.

Matthew T Moon  
Regulatory Specialist II

Letter Number: 616A00012144

\* The conflicting name is dissolved now.

\* We didn't receive our check back.

- Please find enclosed a new one as  
it has been more than 60 days.  
Thanks!

RECEIVED

16 JUN 16

2:37

ACTIONS  
SOCIAL  
FILES

16 JUN 16 11:53:37

# To: FL Corporation Division.

**Please find one Certificate of Conversion for:**

TVX, LLC

Please find enclosed a check for \$105 for the certificate of conversion and the new articles of incorporation.

If there are any questions regarding this filing please call Jessica Marschke at 1-800-981-7183 ext. 1267618

**Please return all completed documents to:**

Business Filings Incorporated  
Attn: Filing Department  
8020 Excelsior Drive, Suite 200  
Madison, WI 53717

Best Regards,

Filing Department  
Business Filings Incorporated

16 OCT 26 PM 5:37

**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:

TVX, LLC

214000027934

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)

on 2/18/2014

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:**

tevixMD Corporation

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.)

Signed this 17 day of MAY, 20 16.

**Required Signature for Florida Profit Corporation:**

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

Printed Name: William Andros Title: President

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

Signature: [Signature]  
Printed Name: William Andros 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 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)

15 OCT 20 11 56:37

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607, F.S.

**ARTICLE I NAME**

The name of the corporation shall be: tevoxMD Corporation

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:  
6650 W Indiantown Rd, #210, Jupiter, FL 33548

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: All lawful business

**ARTICLE IV SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 20,000,000. The par value of each share of stock is \$0.001.

**ARTICLE V OFFICERS/DIRECTORS**

The initial directors of the corporation are:

William Andros, 6650 W Indiantown Rd, #210, Jupiter, FL 33548

Peter Dalton, 6650 W Indiantown Rd, #210, Jupiter, FL 33548

Andrea Vallabh, 6650 W Indiantown Rd, #210, Jupiter, FL 33548

The initial officers of the corporation are:

William Andros, President, 6650 W Indiantown Rd, #210, Jupiter, FL 33548

**ARTICLE VI REGISTERED AGENT**

The name and Florida Street address of the registered agent is: William Andros, 6650 W Indiantown Rd, #210, Jupiter, FL 33548. Located in the County of Palm Beach.

**ARTICLE VII INCORPORATOR**

The name and street address of the incorporator to these Articles of Incorporation is William Andros, 6650 W Indiantown Rd, #210, Jupiter, FL 33548.

I hereby accept the appointment as registered agent and agree to act in this capacity.

Signature:   
William Andros, Registered Agent

Date: 5/17/16

Signature:   
William Andros, Incorporator

Date: 5/17/16

The document was prepared by: Business Filings Incorporated, Mark Williams, 8020 Excelsior Dr., Suite 200, Madison, WI 53717. 608-827-5300