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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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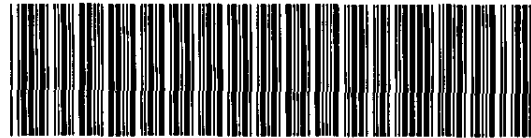
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 NOV -8 PM 4:50
2016

T. BURCH

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COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: HOLISTIC REVOLUTION 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:

JASON G. BLILIE

Contact Person

BLILIE LAW

Firm/Company

350 LINCOLN ROAD, SECOND FLOOR

Address

MIAMI BEACH, FLORIDA 33139

City, State and Zip Code

JASON@BLILIELAW.COM

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

For further information concerning this matter, please call:

JASON BLILIE

at (305) 563-6659

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 ☐ \$113.75 Filing Fees ☐ \$122.50 Filing Fees,
and Certificate of and Certified Copy Certified Copy, and
Status 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:

HOLISTIC REVOLUTION LLC

L14-86734

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 MAY 21, 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**:

HOLISTIC REVOLUTION 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 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 2nd day of November, 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: Jeanette Rivera

Printed Name: Jeanette Rivera Title: Chief Operating Officer

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

Signature: Jeanette Rivera

Printed Name: Jeanette Rivera Title: Managing Member

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)

16 NOV -8 PM 4:50
FILED
CLERK OF CIRCUIT COURT
JANET RIVERA

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: HOLISTIC REVOLUTION INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

963 NE 42ND AVE.

HOMESTEAD, FL 33033

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 10,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Herve Casimir, Chief Executive Officer

Address: 963 NE 42nd Ave.

Homestead, FL 33033

Name and Title: Jamie Rivera, Chief Financial Officer

Address: 1890 NE 37th Ave.

Homestead, FL 33033

Name and Title: Hamlet Mesa, Secretary

Address: 11478 SW 74th Terrace

Miami, FL 33173

Name and Title: Joel Casimir, Vice President & Secretary

Address: 14401 SW 99th Ave.

Miami, FL 33176

Name and Title: Jeanette Rivera, COO and Secretary

Address: 963 NE 42nd Ave.

Miami, FL 33033

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Jeanette Rivera
Address: 963 NE 42nd Ave.
Miami, FL 33033

ARTICLE VII INCORPORATOR

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

Name: Jason Blilie
Address: 350 Lincoln Road, Second Floor
Miami Beach, FL 33139

NOV 16 2016
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RECEIVED
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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

Jeanette Rivera
Required Signature/Registered Agent

11/2/16
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.

/s/ Jason Blilie
Required Signature/Incorporator

11/2/16
Date