# P1600094210

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Submissis Entity Hamis)
(Document Number)
(2
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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SECRETARY SERVICES TO SHARE SERVICES OF COSTACL TO SHARE SERVICES OF COSTA

11/30/16

### **COVER LETTER**

TO:

Charter Section

Tallahassee, FL 32301

Division of Cor	porations			
SUBJECT:	LUGA	NO CAPITAL, II	NC.	
30D31C1	Name of	Resulting Florid	a Profit	Corporation
	e of Conversion, Articles Profit Corporation" in ac			ees are submitted to convert an "Other Business 15, F.S.
Please return all corresp	ondence concerning this	s matter to:		
GIL ELBOIM				
	Contact Person			
LUGANO CAPITAL, IN	C			
	Firm/Company			
2875 NE 191 STREET, U	JNIT 601			
	Address			
AVENTURA, FL 33180				
	City, State and Zip Code	<del></del>	_	
DVTMAX@YAHOO.CO	ОМ			
E-mail address: (t	o be used for future annu	ıal report notific	ation)	
For further information	concerning this matter,	please call:		
GIL ELBOIM		_at (	513 -	6229
Name of Co	ontact Person	Area (	Code and	Daytime Telephone Number
Enclosed is a check for	the following amount:			
<b>■</b> \$105.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Fili and Certified C		□\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: New Filings Section Division of Corporation Clifton Building 2661 Executive Center			New F Division P. O. E	ING ADDRESS: Cilings Section on of Corporations Box 6327 assee, FL 32314

### **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:  LUGANO CAPITAL, LLC
(45 - 206757) Lenter 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
first organized, formed or incorporated under the laws of
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 now organized, formed or incorporated:  N/A
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
LUGANO CAPITAL, 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 por more than 00 days often the date this decrease in filed by the Florida.
(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; <u>AND</u> 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.

Page 1 of 2

Signed thisday of	, 20 <mark></mark> .
Required Signature for Florida Profit Corporation:	
Signature of Chairman. Incorporator: Printed Name: GIL ELBGMTitle: PRESID	ENT
Required Signature(s) on behalf of Other Business E	Entity: [See below for required signature(s).]
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	_ Title:
Signature:	<del></del>
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.	
All others: Signature of an authorized person.	
Fees: Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$70.00 \$8.75 (Optional) \$8.75 (Optional)

2016 HOV 23 PM 2: 15

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

The name of	the corporation shall be: LUGANO CAPITA	is, me.		2 AON 9182
ARTICLE	II PRINCIPAL OFFICE			<b>CT</b> )
	I place of business/mailing address is:			32 AON 9102
	Principal street address		Mailing address, if different is:	23
	Timeipai succi address		withing address, if different is.	PH
2875 NE 191	STREET, UNIT 601			5
AVENTURA	A. FL 33180			<del>- ਨ</del>
	III PURPOSE			
The purpose	e for which the corporation is organized is:			
PROFESSIO	DNAL SERVICES			
ADTICI E	IV SHARES 100			
	of shares of stock is:			
	V INITIAL OFFICERS AND/OR D	MECTODS		_
	GIL ELBOIM - PRESIDENT		STEVEN LEVY	
Address:	2875 NE 191 STREET, UNIT 601	Addross	2875 NE 191 STREET, UNIT 601	
ridaress.	AVENTURA, FL 33180		AVENTURA, FL 33180	
Name and T		— Name and T	itle:	
Name and Title:				
Address:		Address:		
		<del></del>		
Name and T	Title:	Name and T	itle:	
Address:		Address:		

ARTICL	E VI REGISTERED AGENT			
The name	and Florida street address (P.O. Box NOT acceptal	ble) of the registered agent is:		
Name:	GIL ELBOIM		r.a	¥o;
Address:	2875 NE 191 STREET, UNIT 601		= = =	
	AVENTURA, FL 33180		J¥ 28	
ARTICL			P K	18 <u>2</u> 0
The <u>name</u>	e and address of the Incorporator is:		$\ddot{\wp}$	-3 <u>-</u>
Name:	GIL ELBOIM		5	
Address:	2875 NE 191 STREET, UNIT 601			
	AVENTURA, FL 33180			
**************************************	**************************	******	I I	
	een named as registered agent to accept service of pr icate, I am familiar with and accept the appointment			ignatea in
	6 P17 (1C	08/15/2016		
	Required Signature/Registered Agent	Date		
	this document and affirm that the facts stated herein to the Department of State constitutes a third degree		ion subn	nitted in a
	12 P17 (K	08/15/2016		
	Required Signature/Incorporator	Date		