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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
, (Do	ocument Number)	,
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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M. MOON NOV 28 2016

COVER LETTER

TO:	Charter Section Division of Corporations		
SUBJ	Т:		
	Name of Resulting Florida Profit Corporation		
	osed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "ato a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.	Other Bus	siness
Please	turn all correspondence concerning this matter to:		
	DEKIN NAINW Contact Person		
	Contact Person		ಫ∽
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	Firm/Company	ည	•
130	NE MATU GORDENS De #316.	27: 20:	771-57 U
	Address		
	1	1	0.5 r
	City, State and Zip Code		
	City, State and Zip Code		
R	ALTY GASEIEL & GHAIL. COM _ nail address: (to be used for future annual report notification)		
I	nail address: (to be used for future annual report notification)		
For fu	er information concerning this matter, please call:		
7	HINN NAINAN at (786) 262-4397		
	Name of Contact Person Area Code and Daytime Telephone Number		
Enclos	is a check for the following amount:		
□ \$10	10 Filing Fees and Certificate of Status Status Sta		
New F Division Clifton 2661 I	MAILING ADDRESS: ngs Section of Corporations uilding cutive Center Circle ee, 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:
RIO COLDENDO LLE (L12-36827)
Enter Name of Other Business Entity
•
2. The "Other Business Entity" is a Linited Liability Conpany, 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)
03/15/2017
on O3 /15/2012 . Enter date "Other Business Entity" was first organized, formed or incorporated
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
RIO COLDENS CORR
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 NOV	. 20 16.	
Required Signature for Florida Profit Corporation:		
Signature of Chairman, Vocabairman, Director, Office Incorporator: Printed Name: AUXEM itle:	cer, or, if Directors or Officers have not been se	elected, an
Required Signature(s) on behalf of Other Business	Entity: [See below for required signature(s).]	
Signature:		
Signature: LILIWA CALDERON	Title: NETBER _	
Signature:		
Printed Name:	Title:	
Signature:	 	
Printed Name:	Title:	
Signature:	*** **********************************	
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:	<u> </u>	
Printed Name:	Title:	
If Florida General Partnership or Limited Liability Signature of one General Partner.	Partnership:	SE 10
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	Limited Partnership:	20V 20
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		
All others: Signature of an authorized person.		STATE TOTOL
Fees: Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	

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

ARTICLE I NAME	A	
The name of the corporation shall be: KIO (Coroesoo coep	
ARTICLE II PRINCIPAL OFFICE		
The principal place of business/mailing address is:		
Principal street address 1301 NE YUNK GSEDENS TOR #316	Mailing address, if different is:	
MINNI FL 33179		
ARTICLE III PURPOSE The purpose for which the corporation is organized is: ANY LAWFUL BUSINESS		
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<del></del>		
ARTICLE IV SHARES The number of shares of stock is: 100.		Section 1
ARTICLE V INITIAL OFFICERS AND/OR DIR	RECTORS	
Name and Title: LILIANA CALDERON D.	Name and Title:	
Address: 1301 NE HIAM GREDENS	$\mathcal{N}_{\text{Address}}$ :	
Address: 1301 NE HISMI GREDENS #316, MAMI FL 33179		
Name and Title:	Name and Title:	
Address:	Address:	
Name and Title:		
Address:	Address:	

<u>ARTICL</u>	<u>E VI REGISTERED AGENT</u>		
The name	e and Florida street address (P.O. Box NOT accepta	able) of the registered agent is:	
Name:	DEHIM NOIMAN		
Address:	DEMISSI NOIMAN BARDEN DE		
	#316, Mami FL 33179		
ARTICL			
The name	e and address of the Incorporator is:		
Name:	DEPILON NOTAN		
Address:	1301 NE KLANI GARDENS I #316 MANI FI 33179	De .	
	#316 MINI FI 33179		
******	*********	******	
		rocess for the above stated corporation at the place designal t as registered agent and agree to act in this capacity	ted in
	Canton	11/21/16.	
	equived Signature/Registered Agent	Date	
	this document and affirm that the facts stated herein to the Departmentof State constitutes a third degre	n are true. I am aware that any false information submitted to felony as provided for in s.817.155, F.S.	1 in a
	Darfor	11/21/16·	
	Required Signature/Incorporator	Date	

SEC. (1979) STATE (2004) STATE

Required Signature/Incorporator