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





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COVER LETTER

Division of Corporations		
SUBJECT: Monique Catoggio 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:		
Monique Catoggio Contact Person		
Monique Catoggio Contact Person Monique Catoggio INC. Firm/Company		
6040 SW 27 St. Address		
MigMi, FL 33155 City, State and Zip Code		
MC @ Monique Catiggio - COM E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call: Monique Catoggia at (305) 321-7909 Name of Contact Person Area Code and Daytime Telephone Number		
Enclosed is a check for the following amount:		
105.00 Filing Fees		

STREET ADDRESS:

New Filings Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Charter Section

TO:

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 <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 Co	onversion is:
Monique Catogaio	
Enter Name of Other Business Entity	 ·
2. The "Other Business Entity" is a	
(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 Florido (Enter state, or if a non-U.S. entity, the name of the country)	
on January 21, 2016 Enter date "Other Business Entity" was first organized, formed or incorporate	
Enter date "Other Business Entity" was first organized, formed or incorporate	ed
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the law organized, formed or incorporated:	vs of which it is now
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation Monique Catoggio, INC. Enter Name of Florida Profit Corporation	<u>on:</u>
5. If not effective on the date of filing, enter the effective date: 12317. (The effective date: 1) cannot be prior to nor more than 90 days after the date this document Department of State; AND 2) must be the same as the effective date listed in the attached Art if an effective date is listed therein.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, t listed as the document's effective date on the Department of State's records.	ticles of Incorporation,
Page 1 of 2	FILER 17 JAN 31 PH

Signed this 23 day of Jan Jay , 20 17
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: Nonique Catago Title: President
Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]
Signature:
Printed Name: Monique Catoggio Title: CEO
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: 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)

The name of the corporation shall be:	2 Catoggio, INC.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
6040 SW 27 St Miami, FL 33155	
The Corporation is organized is: The Corporation shall or business permitted United States and of	engage in any activity under the state of Florida
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRE	
Name and Title: Monique Catoggio	Name and Title: Secretory
Address: 6040 SW 27 St.	Address: 6040 SW 27 St Might, FL 38155
Miami, FL 33155	Miani, FL 38155
Name and Title:	Name and Title:
Address:	Address:
Name and Title:	Name and Title:
Address:	Address:

The name	e and Florida street address (P.O. Box NOT	acceptable) of the registered agent is:
Name:	William N. Catoggio	
Address:	6040 SW 27 St	
	Miami, FL 33155	
ARTICL	•	
The name	e and address of the Incorporator is:	
Name:	Monique Cartaggio	
Address:	6040 SW 27 St	
	Migmi, FL 33155	
*****	**************	******
		ice of process for the above stated corporation at the place designated in intment as registered agent and agree to act in this capacity
	ANNI	1/23/17
	Required Signature/Registered Agent	Date
		l herein are true. I am aware that any false information submitted in a
document	t to the Department of State constitutes a third	d degree felony as provided for in s.817.155, F.S.
. 1	MX/	1/23/17
	Required Signature/Incorporator	Date

Required Signature/Incorporator

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