P17000013866

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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SECRETARY OF STATE
ALT KHASSEE FLORIDA

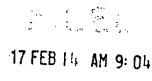
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COVER LETTER

Division of Corporati	ions			
SUBJECT: MANCO FOOD E	BROKERS INC.			
oobale 1.	Name of F	Resulting Florid	a Profit (Corporation
The enclosed Certificate of C Entity" into a "Florida Profit				tes are submitted to convert an "Other Business 5, F.S.
Please return all corresponder	nce concerning this	matter to:		
RICHARD N. DAWSON				
C	Contact Person		_	
RICHARD N. DAWSON, CPA	A, PA			
F	Firm/Company		_	
4521 SHARON RD. STE 430-A	4			
	Address		_	
CHARLOTTE, NC 28211				
City,	State and Zip Code	· · · · ·	-	
RICK@RICKDAWSON.COM				
E-mail address: (to be u	ised for future annu	al report notific	ation)	
For further information conce	erning this matter, p	lease call:		
RICHARD N. DAWSON		at () 442-83	300
Name of Contact			ode and	Daytime Telephone Number
Enclosed is a check for the fo	ollowing amount:			
■ \$105.00 Filing Fees □\$1 and 0 State	Certificate of	□\$113.75 Filia and Certified C		□\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: New Filings Section Division of Corporations Clifton Building 2661 Executive Center Circle	è		New Fi Divisio P. O. B	ING ADDRESS: illings Section on of Corporations tox 6327 assee, FL 32314

Tallahassee, FL 32301

Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation



SEGUL DAMY OF STATE FALLAHASSEE FLORIDA

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:
MANCO FOOD BROKERS, INC.
Enter Name of Other Business Entity
2. The "Other Business Entity" is a FOREIGN FOR PROFIT CORPORATION: F13000000905
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business (rust, etc.)
first organized, formed or incorporated under the laws ofNORTH CAROLINA
(Enter state, or if a non-U.S. entity, the name of the country)
03/26/2003 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: 4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
MANCO FOOD BROKERS, 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 Florid 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 8 day of February	, 20 <u>17</u>
Required Signature for Florida Profit Corporation	<u>u</u>
Signature of Chairman, Vice Chairman Director Off Incorporator: MANDY OUGHENOUR Time PRES	icer, or, if Directors or Officers have not been selected, an
Required Signature(s) on behalf of Other Business	 -
Signature: MMMy Amplim	DUB/
Printed Name: MANDY COUGHENOUR	Title: PRESIDENT
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 Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	y 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: 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)

	II PRINCIPAL OFFICE I place of business/mailing address is:		
11754 WATI	Principal street address ERSTONE LOOP DR.	Mailing add	lress, if different is:
WINDERME	ERE, FL 34786		
	III PURPOSE for which the corporation is organized is:		
ANT AND A	ALL LAWFOL BUSINESS		
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			SSE SSE T
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	·		<u> </u>
	IV SHARES of shares of stock is: 1000 V INITIAL OFFICERS AND/OR DIR	cctors	SIAIE RID
The number	of shares of stock is: 1000 V INITIAL OFFICERS AND/OR DIR MANDY COLIGHENOUR PRESIDENT		SIAIE RID
The number	of shares of stock is: 1000 V INITIAL OFFICERS AND/OR DIR itle: MANDY COUGHENOUR, PRESIDENT 11754 WATERSTONE LOOP DR	Name and Title:	SIAIE RID
The number ARTICLE Name and T	of shares of stock is: 1000 V INITIAL OFFICERS AND/OR DIR itle: MANDY COUGHENOUR, PRESIDENT	Name and Title:Address:	STATE STATE
The number ARTICLE Name and T Address:	of shares of stock is: 1000 V INITIAL OFFICERS AND/OR DIR. ittle: 11754 WATERSTONE LOOP DR	Name and Title: Address:	51AiE 0KIU
The number ARTICLE Name and T Address:	of shares of stock is: 1000 V INITIAL OFFICERS AND/OR DIR ittle: MANDY COUGHENOUR, PRESIDENT 11754 WATERSTONE LOOP DR WINDERMERE, FL 34786	Name and Title:Address:	51ATE 51ATE
The number of ARTICLE Name and T Address: Name and T Address:	of shares of stock is: 1000 V INITIAL OFFICERS AND/OR DIR ittle: MANDY COUGHENOUR, PRESIDENT 11754 WATERSTONE LOOP DR WINDERMERE, FL 34786 ittle:	Name and Title: Address: Name and Title: Address: Address:	SIATE CHRIDA

ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: MANDY D. COUGHENOUR Name: 11754 WATERSTONE LOOP DR Address: WINDERMERE, FL 34786 ARTICLE VII **INCORPORATOR** The name and address of the Incorporator is: MANDY D. COUGHENOUR Name: 11754 WATERSTONE LOOP DR Address: WINDERMERE, FL 34786 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

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.

Required Signature/Incorporator

2/8/17

Date

JELACTION OF STATE