P17000028070

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

Office Use Only

N. SAMS MAR 2 9 2017



300297125173

03/27/17--01029--007 **122.50

FILED

WAR 27 PN ID II

WAR 18 PN II SAIE

COVER LETTER

TO: Charter Section Division of Corporations	
SUBJECT: EZE Air Solutions	Inc
Name of Resulting Florida Pr	rofit Corporation
The enclosed Certificate of Conversion, Articles of Incorporation, a Entity" into a "Florida Profit Corporation" in accordance with s. 60	
Please return all correspondence concerning this matter to:	
Kathleen S, Faria	
Contact Person	
Ere Air Solutions Inc Firm/Company	
Firm/Company	
18410 Paulson Dr. Ste. 5 Address	
Address	
Port Charlotte Fl, 33959	Y
City, State and Zip Code	
ezeair Solutions//ce outlook, c E-mail address: (to be used for future annual report notification	
For further information concerning this matter, please call:	
-	764-6400 e and Daytime Telephone Number
Name of Contact Person Area Cod	e and Daytime Telephone Number
Enclosed is a check for the following amount:	,
\$105.00 Filing Fees and Certificate of Status	
New Filings SectionNDivision of CorporationsDClifton BuildingP	ew Filings Section ivision of Corporations O. Box 6327 allahassee, FL 32314

Tallahassee, FL 32301

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:			
Eze Air Solutions LLC - L13 000043633			
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.)			
general partnership, common law or business trust, etc.)			
first organized, formed or incorporated under the laws of Florida			
3-25-13			
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:			
EZE Air Solutions Inc			
Enter Name of Florida Profit Corporation			
5. If not effective on the date of filing, enter the effective date: 3/31//7 (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 23 day of March ,2017
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: Paul Farra Title: Managing Member
Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]
Signature: Kathlen Javia Printed Name: KAthleen Faria Title: Managing Menber
Printed Name: KAthleen Faria Title: Managing Menber
Signature: Ethan Faria
Signature: Ethan Faria Title: Manaying Member Signature:
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:
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)

Page 2 of 2

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

in compliance with Chapter 607 and	doi Chapter 021, F.S. (Front)	inter & a
ARTICLE I NAME The name of the corporation shall be: E2e A17 ARTICLE II PRINCIPAL OFFICE	Solutions Inc 17	MP 27
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	1.4.1.1.1 1.4.1.1.1.1.1.1.1.1.1.1.1.1.1.	PAREL TELEPOR
18410 Principal street address Ste,5	Mailing address, if different is:	
Port Charlotte F1, 33954	Same	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Any and All Lawful Bu	5ine55	
		_
	•	
ARTICLE IV SHARES The number of shares of stock is: // 0 0		
Name and Title: Paul G. Faria - Member Name		
Address: Box 3808// Addr		
Murdock F1, 33938 Name and Title: KAthleen S, Faria Management		
_		
Address: <u>Box 380811</u> Addr Murdock, F1 33938	ress:	
Murdock, F1 33938 Name and Title: Ethan K, Faria - mentaran	e and Title:	
Address: 13487 Santa Rosa AlleAddr		
Port Charlotte, Fl 33981		

<u>ARTICLE</u>	VI REGISTERED AGENT	
The name a	and Florida street address (P.O. Box NOT acceptable) of the registered agent is:	
Name:	Paul Kria	FLEC
Address:	9676 SW Southern Dreams Rd.	17 MAR 27 PH 10: 10
-	Arcadia, F1.34266	《後後終》。自第二十二十八十二 「ALLANASOFT (1911期底)
ARTICLE	VII INCORPORATOR and address of the Incorporator is:	
Name:	Paul Jann 9676 SW Sonthern Dreams Rd. Arcadia, F1 34266	
Address:	9676 SW Southern Dreams Rd.	
ļ.	Arcadia, F1 34266	
*****	******************	
_	n named as registered agent to accept service of process for the above stated corporation at the	
this certifica	a te, I am familiar with and accept the appointment as registered agent and agree to act in this	capacity
A CONTRACTOR OF THE PARTY OF TH	auc 3/24/17	
	Required Signature/Registered Agent Date	
I submit thi	is document and affirm that the facts stated herein are true. I am aware that any false infor	nation submitted in a
	o the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	
سر ا		
1	Cul Jans 3/24/17	
	Required Signature/Incorporator Date	
	arVarV	

Electronic Articles of Organization For Florida Limited Liability Company

L13000043833 FILED 8:00 AM March 25, 2013 Sec. Of State alunt

Article I

The name of the Limited Liability Company is: EZE AIR SOLUTIONS LLC

Article II

The street address of the principal office of the Limited Liability Company is:

207 HARRISBURG STREET PORT CHALOTTE, FL. 33954

The mailing address of the Limited Liability Company is:

207 HARRISBURG STREET PORT CHALOTTE, FL. 33954

Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

PAUL G FARIA 207 HARRISBURG STREET PORT CHARLOTTE, FL. 33954

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: PAUL G. FARIA

Article V

The name and address of managing members/managers are:

Title: MGRM PAUL G FARIA 207 HARRISBURG STREET PORT CHARLOTTE, FL. 33954

Title: MGRM KATHLEEN S FARIA 207 HARRISBURG ST PORT CHARLOTTE, FL. 33954

Title: MGRM ETHAN K FARIA 207 HARRISBURG ST PORT CHARLOTTE, FL. 33954

Article VI

The effective date for this Limited Liability Company shall be:

03/24/2013

Signature of member or an authorized representative of a member

Electronic Signature: PAUL G. FARIA

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

L13000043833 FILED 8:00 AM March 25, 2013 Sec. Of State