P17000045952

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/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:	
<u> </u>		



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03/31/17--01049--003 **113.75

Office Use Only

WM7-28635



April 4, 2017

CHEYENNE MOSELEY LEGALZOOM.COM, INC. 101 N BRAND BLVD., 11TH FLR. GLENDALE, CA 91203

SUBJECT: HEMISPHERE ASSETS, INC.

Ref. Number: W17000028635

We have received your document for HEMISPHERE ASSETS, INC. and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 117A00006485

COVER LETTER

TO: Charter Section Division of Corpora	ations			
SUBJECT: HEMISPHERE	ASSETS, Inc.			
SCHOOL .	Name of R	esulting Florida I	Profit C	Corporation
The enclosed Certificate of Entity" into a "Florida Prof				es are submitted to convert an "Other Business 5, F.S.
Please return all correspond	dence concerning this	matter to:		
Cheyenne Moseley				
	Contact Person			
Legalzoom.com, Inc.				
	Firm/Company			·
101 N Brand Blvd 11th Floor	r			
	Address			
Glendale, CA 91203				
Cit	y, State and Zip Code			
neoproject@msn.com				
E-mail address: (to be	e used for future annu	al report notificat	ion)	
For further information cor	ncerning this matter, p	lease call:		
Cheyenne Moseley		at (773-	0888 x 9724
Name of Conta	act Person		de and	Daytime Telephone Number
Enclosed is a check for the	following amount:			
	\$113.75 Filing Fees ad Certificate of catus	■\$113.75 Filing and Certified Co		□\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: New Filings Section Division of Corporations Clifton Building 2661 Executive Center Cir	rcle	<u>1</u> 1	New Fi Divisio P. O. B	ING ADDRESS: illings Section on of Corporations fox 6327 assee, FL 32314

Tallahassee, FL 32301

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: HEMISPHERE ASSETS LLC.
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.)
first organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)
06/21/2016
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:
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:

Signed this 21 day of MARCh	, 20_17		
Required Signature for Florida Profit Corporation:			
Signature of Chairman, Vice Chairman, Director, Office Incorporator: Mal Monacelli Title: Presiden	er, or, if Directors or Officers have not been	selected	l, an
Required Signature(s) on behalf of Other Business E	ntity: [See below for required signature(s)	.]	
Printed Name: Neal J. Monacelli	Title: AMBR		
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.	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.		The state of the s	17 "
All others: Signature of an authorized person.			MAY 23
Fees:) (1) (3)	7
Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	42.	: 3

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

The name of the corporation shall be:		
ARTICLE II PRINCIPAL OFFICE		
The principal place of business/mailing address is	:	
Principal street address	Mailing addr	ess, if different is:
16545 Majestic Court		
Clermont, FL 34711		
ARTICLE III PURPOSE		
The purpose for which the corporation is organic	zed is:	
IT consulting		
ARTICLE IV SHARES The number of shares of stock is:		
The number of shares of stock is:	OR DIRECTORS	
. 100	OR DIRECTORS	
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND Neal I Manacelli - PSTD		
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND Name and Title: 16545 Majestic Court	OR DIRECTORS Name and Title:	
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND Name and Title: Neal J. Monacelli - PSTD Address: Clermont, FL 34711	Name and Title:Address:	
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND Name and Title: Neal J. Monacelli - PSTD Address: Clermont, FL 34711 Name and Title:	Name and Title: Address: Name and Title:	
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND Name and Title: 16545 Majestic Court Clermont, FL 34711 Name and Title: Address:	Name and Title: Address: Name and Title: Address: Address:	THE ASS
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND Name and Title: Neal J. Monacelli - PSTD 16545 Majestic Court Clermont, FL 34711 Name and Title: Address:	Name and Title: Address: Name and Title: Address:	7 H/Y 23 - 1
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND Name and Title: 16545 Majestic Court Clermont, FL 34711 Name and Title: Address:	Name and Title: Address: Name and Title: Address:	7 H/Y 23 - 1

ARTICE	<u>e vi registered age</u>	NT .		
The <u>name</u>	and Florida street address (P.	O. Box NOT acceptable) of the	registered agent is:	
Name:	Neal J. Monacelli			
Address:	16545 Majestic Court			
	Clermont, FL 34711			
ARTICL		•		
The <u>name</u>	and address of the Incorporato	r is:		
Name:	Neal J. Monacelli			
Address:	16545 Majestic Court			
	Clermont, FL 34711			
******* Having be	**************************************	**************************************	**************************************	at the place designated in
this certifi	icate, I am familiar with and acc	cept the appointment as registe.	red agent and agree to act in l	this capacity
14/	Manch -	Neal J. Monacelli	21 MAR 2017	
	Required Signature/Registered	l Agent	Date	•
I submit ti document	his document and affirm that th to the Department of State con:	he facts stated herein are true. stitutes a third degree felony as	I am aware that any false in provided for in s.817.155, F.	formation submitted in a S.
Ш1.	Mend	Neal J. Monacelli	21 MAR ZOI	2
	Required Signature/Incorpora	tor	Date	- 1 2

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