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(Req	uestor's Name)	
(Addi	ess)	
(Addı	ress)	
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	
		:

Office Use Only



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SCURGIAGY OF STATE
PAIL AND SSEE, FLORAD

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COVER LETTER

TO:	Charter Section Division of Cor					
SHRI	ECT: Rohe, Inc.					
5000		Name of	Resulting Flo	rida Profit	Corporation	
		e of Conversion, Article Profit Corporation" in ac			ees are submitted to convert a 15, F.S.	n "Other Business
Please	e return all corresp	ondence concerning this	s matter to:			
Ricard	do A Rodriguez					
		Contact Person				
		Firm/Company				
4788 9	SW 183 Avenue					
		Address				
Miami	i, FL 33029					
		City, State and Zip Code	e			
pdrick	xy@gmail.com					
I	E-mail address: (t	o be used for future anni	ial report noti	fication)		
For fu	rther information	concerning this matter,	please call:			
Ricard	lo A Rodriguez		786 at (200-1	323	
	Name of Co	ontact Person	_ `	a Code and	Daytime Telephone Number	
Enclos	sed is a check for	the following amount:				
\$10	05.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 F and Certified		□\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
New F Division Clifton	EET ADDRESS: Filings Section on of Corporation n Building Executive Center			New F Division P. O. E	ING ADDRESS: illings Section on of Corporations Box 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:	:
Rohc, LLC 15-154394	
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)	
September 9, 2015	
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 organized, formed or incorporated: Florida	it is now
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u> Rohc, 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 a Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Inco 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 listed as the document's effective date on the Department of State's records.	orporation,
Page 1 of 2	-

Page 1 of 2



Signed this 24 day of Apri		 ·
Required Signature for Florida Profit Corpo	ration:	
Signature of Chairman, Vice Chairman, Directo Incorporator: Kicardo A Rodriguez Title:	r, Officer, or, if Directors or Officers	s have not been selected, an
Required Signature(s) on behalf of Other Bu		
Signature: Ricards Rodin	~	
Printed Name: Ricardo Codri	guez Title: Owner	
Signature:		
Printed Name:	Title:	·····
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:	MANAGEMENT CONTROL CON	
Printed Name:	Title:	
Signature:	- Malakin dine a cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-cross-c	
Printed Name:	Title:	
If Florida General Partnership or Limited Li Signature of one General Partner.	ability Partnership:	
If Florida Limited Partnership or Limited Li Signatures of <u>ALL</u> General Partners.	ability Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Represen	tative.	
All others: Signature of an authorized person.		A.
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) Page 2 of 2	FILED 17 JUN-5 PH 3: 38 LANASSEE FLORIDA

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

The principal place of business/mailing address is:		
Principal street address 788 SW 183 Avenue	Mailing address	ss, if different is:
liramar, FL 33029		
RTICLE III PURPOSE		
he purpose for which the corporation is organized is ny and all lawfull business	::	
RTICLE IV SHARES		
ne number of shares of stock is: 100 RTICLE V INITIAL OFFICERS AND/OR		
ne number of shares of stock is: RTICLE V INITIAL OFFICERS AND/OR A		A) co
RTICLE V INITIAL OFFICERS AND/OR ame and Title: A788 SW 183 Avenue	DIRECTORS	77 July 3850 5
RTICLE V INITIAL OFFICERS AND/OR Is ame and Title: A788 SW 183 Avenue	DIRECTORS Name and Title:	ACCO TO THE STATE OF THE STATE
RTICLE V INITIAL OFFICERS AND/OR ame and Title: Armonic Reserved And Antiquez, President 4788 SW 183 Avenue Miramar, FL 33029	DIRECTORS Name and Title: Address:	17 JUH - S PH
RTICLE V INITIAL OFFICERS AND/OR ame and Title: A 188 SW 183 Avenue Miramar, FL 33029 A 2016 August Augu	DIRECTORS Name and Title: Address: Name and Title:	TAILLANGES OF ORAL
RTICLE V INITIAL OFFICERS AND/OR ame and Title: A 188 SW 183 Avenue Miramar, FL 33029 ame and Title:	Name and Title: Address: Name and Title: Address:	TAILLANGS OF OR
he number of shares of stock is: RTICLE V INITIAL OFFICERS AND/OR Idea and Title: Ricardo A Rodriguez, President 4788 SW 183 Avenue Miramar, FL 33029 Idea and Title: Idea	DIRECTORS Name and Title: Address: Name and Title: Address:	TAILLANGES SE SE OMMA

ARTICL	E VI REGISTERED AGENT	
The name	and Florida street address (P.O. Box N	OT acceptable) of the registered agent is:
Name:	Ricardo A Rodriguez	
Address:	4788 SW 183 Avenue	
	Miramar, FL 33029	_
ARTICL	E VII INCORPORATOR	
The name	and address of the Incorporator is:	
Name:	Ricardo A Rodriguez	
Address:	4788 SW 183 Avenue	
	Miramar, FL 33029	

I submit th	Required Signature/Registered Agent COVO COCO COCO his document and affirm that the facts st to the Department of State constitutes a se	Date Date Date Date Description of the Legister of the Legiste
_	Required Signature/Incorporator	4/24/17 Pare
R	INCOrporator	~ez
	Incorporator	and
	owner	