P17000068850

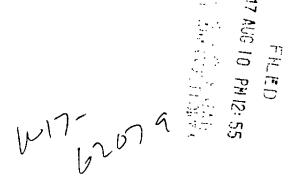
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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07/27/17--01011--021 **105.00



T. BURCH AUG 1 6 2017

COVER LETTER

Charter Section

Tallahassee, FL 32301

TO:

Division of Cor	porations			
SUBJECT: AWAKE EN	TERTAINMENT INC			
SOBJECT	Name of	Resulting Florida	Profit	Corporation
The enclosed Certificate Entity" into a "Florida F				ees are submitted to convert an "Other Business 15, F.S.
Please return all corresp	ondence concerning this	s matter to:		
MANUEL RONDON				
	Contact Person		-	
AWAKE ENTERTAINM	ENT INC			
	Firm/Company		-	
245 NE 14TH STREET/N	4ELODY TOWER UNIT	3614		
	Address		=	
MIAMI, FL 33132				
	City, State and Zip Code	3	-	
david.rondon@gmail.com	ı			
E-mail address: (to	be used for future annu	ial report notifica	tion)	
For further information	concerning this matter,	please call:		
MANUEL RONDON	-	786 at (657-8	780
Name of Co	ntact Person	- \ 	ode and	Daytime Telephone Number
Enclosed is a check for	the following amount:			
■ \$105.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	☐\$113.75 Filin and Certified Co	_	☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: New Filings Section Division of Corporation Clifton Building 2661 Executive Center (New F Division P. O. B	ING ADDRESS: illings Section on of Corporations Box 6327 assee, FL 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 28, 2017

MANUEL RONDON 245 NE 14TH STREET MELODY TOWER UNIT 3614 MIAMI, FL 33132

SUBJECT: AWAKE ENTERTAINMENT INC

Ref. Number: W17000062079

We have received your document for AWAKE ENTERTAINMENT INC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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.

Tim Burch
Regulatory Specialist III

www.sunbiz.org

Letter Number: 317A00015265

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 Coawake entertainment LLC	onversi	on is:	
Enter Name of Other Business Entity		7 A	
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY	3-1	35	7.
(Enter entity type. Example: limited liability company, limited partnership general partnership, common law or business trust, etc.)), (1) 	AUG TO PH 12:	F. M. T. C. D
first organized, formed or incorporated under the laws of FLORIDA	 		_
(Enter state, or if a non-U.S. entity, the name of the country)		ch Ch	
MAY 3, 2017			
Enter date "Other Business Entity" was first organized, formed or incorporat	.ed		
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the lavorganized, formed or incorporated: FLORIDA	ws of w	'hich	it is now
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> AWAKE ENTERTAINMENT INC	on:		
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 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, the statutory filing requirements.	ticles of	f Inco	rporation
listed as the document's effective date on the Department of State's records.			

Signe	d thisday of	. 20
Requi	ired Signature for Florida Profit Corporatio	on:
Signat Incorp Printe	ture of Chairman, Vice Chairman, Director, Of porator: d Name: MANUEL RONDON Title: PRES	Ficer, or, if Directors or Officers have not been selected, ar
(Requi	ired Signature(s) on behalf of Other Busines	ss Entity: [See below for required signature(s).]
Printe	d-Name: MANUEL PAVID ROW	1000stilles 12=510ENT
	ture;	
Printe	d Name:	Title:
Signat	ture;	
Printe	d Name:	Title:
Signat	ture:	
Printe	d Name:	Title:
Signat	ture;	
Printe	d Name:	Title:
Signat	ture:	
Printe	d Name:	Title:
	rida General Partnership or Limited Liabili ture of one General Partner.	ty Partnership:
	rida Limited Partnership or Limited Liabilitures of ALL General Partners.	ty Limited Partnership:
	rida Limited Liability Company: ture of a Member or Authorized Representative	<u>.</u>
All ot Signat	hers: ture of an authorized person.	
Fees:		
	Certificate of Conversion: Fees for Florida Articles of Incorporation:	\$35.00 \$70.00
	Certified Copy: Certificate of Status:	\$8.75 (Optional) \$ 8.75 (Optional) \$

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

	ERTAINMENT INC
The principal place of business/mailing address is:	
Principal street address 245 NE 14TH STREET	Mailing address, if different is:
MELODY TOWER UNIT 3614	
MIAMI, FL 33132	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized	1 is:
ANY AND ALL LEGAL PURPOSES	
'he number of shares of stock is:	
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OI	R DIRECTORS
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OI Same and Title: MANUEL RONDON 245 NE 14TH ST UNIT 3614	R DIRECTORS Name and Title:
the number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR Same and Title: MANUEL RONDON 245 NE 14TH ST UNIT 3614	R DIRECTORS Name and Title:
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OI Same and Title: 245 NE 14TH ST UNIT 3614	R DIRECTORS Name and Title: Address:
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OI Same and Title: MANUEL RONDON 245 NE 14TH ST UNIT 3614 MIAMI, FL 33132	R DIRECTORS Name and Title: Address:
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OI Same and Title: MANUEL RONDON 245 NE 14TH ST UNIT 3614 MIAMI, FL 33132	R DIRECTORS Name and Title: Address:
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OI Same and Title: MANUEL RONDON Address: MIAMI, FL 33132 Same and Title: Manuel Rondon Address	Name and Title: Address: Name and Title:
The number of shares of stock is: ARTICLE V	Name and Title: Address: Name and Title:
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OI Name and Title: MANUEL RONDON 245 NE 14TH ST UNIT 3614 MIAMI, FL 33132 Name and Title:	Name and Title: Address: Name and Title: Address: Address:
ARTICLE V INITIAL OFFICERS AND/OI Name and Title: MANUEL RONDON 245 NE 14TH ST UNIT 3614 MIAMI, FL 33132 Name and Title: Address:	Name and Title: Address: Name and Title: Address: Address:
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OI Name and Title: MANUEL RONDON 245 NE 14TH ST UNIT 3614 MIAMI, FL 33132 Name and Title: Address:	Name and Title: Address: Name and Title: Address: Name and Title: Address:

ARTICI.	E VI REGISTERED AGENT	
		OT acceptable) of the registered agent is:
Name:	MANUEL RONDON	
Address:	245 NE 14TH ST UNIT 3614	
	MIAMI, FL 33132	
ARTICL	·· 	AUG 10
The <u>name</u>	and address of the Incorporator is:	
Name:	MANUEL A MAESTRE	PH 12:
Address:	9443 SW 170TH PATH	
	MIAMI, FL 33196	္က်" ာ

		7/25/2017
	Required Signature/Registered Agent	Date
		tated herein are true. I am aware that any false information submitted in a third degree felony as provided for in s.817.155, F.S.
	MAESTRE	7/25/2017
	Required Signature/Incorporator	/ Date