# PITOCOOS5985

<u>,                                     </u>	
(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

M. MOON OCT 2 4 2017



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October 23, 2017

いらだ。 ROBERT BRENKUS 4645 S**M** 11TH PL #304 CAPE CORAL, FL 33904

SUBJECT: SWANKY INC Ref. Number: W17000084299

We have received your document for SWANKY 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):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Incorporation, if any.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The Certificate of Conversion must contain the name of the limited liability company as set forth in the attached articles of organization.

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.

Letter Number: 117A00021293

Terri J Schroeder Regulatory Specialist III

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#### **COVER LETTER**

Division of Co			
SUBJECT: SWANKY.	INC		
	Name of	Resulting Florida Profit	Corporation
		s of Incorporation, and forcerdance with s. 607.11	ees are submitted to convert an "Other Business 15, F.S.
Please return all corresp	condence concerning this	s matter to:	
ROBERT BRENKUS			
-	Contact Person	<del></del>	
SWANKY, INC			
	Firm/Company		
4645 SE 11TH PLACE,	SITE 304		
	Address		
CAPE CORAL, FL 3390	4		
	City. State and Zip Code	e	
swankpipe@yahoo.com			
E-mail address: (t	o be used for future annu	ual report notification)	
For further information	concerning this matter.	please call:	
ROBERT BRENKUS		at ( 702 ) 498-7	056
Name of Co	ontact Person	Area Code 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 Filing Fees and Certified Copy	□\$122.50 Filing Fees. Certified Copy, and Certificate of Status
STREET ADDRESS: New Filings Section			ING ADDRESS:

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 New Filings Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



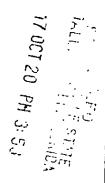
## Certificate of Conversion For "Other Business Entity" Into

### 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: SWANKY, INC
Enter Name of Other Business Entity
2. The "Other Business Entity" is a CORPORATION
(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
(Enter state, or if a non-U.S. entity, the name of the country)
7/19/2011 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 <u>attached Articles of Incorporation</u> : SWANKY, INC
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: 16/20/17  (The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)  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.

Page 1 of 2



Signed this 4th day of OCTOBER		•
Required Signature for Florida Profit Corpora		
Signature of Chairman, Vice Chairman Director, Incorporator: ROBERT BRENKUS  Printed Name: ROBERT BRENKUS  Title: P	1/10 6	not been selected, an
Required Signature(s) on behalf of Other Busi	ness Entity: [See below for required sign	nature(s).]
Signature: Coher Brenking	)	
Printed Name: ROBERT BRENKUS	Title: PRESIDENT	
Signature: Robert Brenkus		
Printed Name:		
Signature:		<del></del>
Printed Name:		
Signature:		
Printed Name:	Title:	<del></del>
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
If Florida General Partnership or Limited Lial Signature of one General Partner.	pility Partnership:	
If Florida Limited Partnership or Limited Liab Signatures of <u>ALL</u> General Partners.	oility Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representat	ive.	
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)	TOCT 20 PH 3:
	Page 2 of 2	3:5

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

ARTICLE I NAME The name of the corporation shall be:  SWANKY, INC		
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:		
Principal street address 4645 SE 11TH PLACE, SUITE 304 CAPE CORAL, FL 33904	Mailing address, if different is:	<del></del>
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  VIDEO CONSULTING		  -
		- - -
ARTICLE IV SHARES The number of shares of stock is:	17 0CT 2C	
ARTICLE V INITIAL OFFICERS AND/OR DIR  Name and Title:  Address:  CAPE CORAL, FL 33904	Name and Title: Address:	Wante Land
Name and Title:  Address:		
Name and Title:	Name and Title:	<del>-</del>

	EVI REGISTERED AGENT e and Florida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	ROBERT BRENKUS		
Address:	4645 SE 11TH PLACE, SUITE 304		
	CAPE CORAL, FL 33904		
ARTICL			
rne <u>name</u> Name:	e and address of the Incorporator is:  ROBERT BRENKUS		
Address:	4645 SE 11TH PLACE, SUITE 304		
	CAPE CORAL, FL 33904		
this certifi	een named as registered agent to accept service of proceicate, I am familiar with and accept the appointment as		ated in
Robe	ere Breneus Whent Grenkin	10-04-2017	
	Required Signature/Registered Agent	Date	
	his document and affirm that the facts stated herein are to the Department of State constitutes a third degree fel		ted in a
Po	bere Brenous Exhert Branken	10-04-2017	

Required Signature/Incorporator

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Date