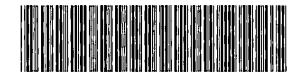
P17000101537

(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:
NO Money
w17-91511
W11 41511

Office Use Only



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COVER LETTER

TO: Charter Section Division of Corporat	ions			
SUBJECT: Budd	ly Custara	lnc. Resulting Florida Pr		
	Name of I	Resulting Florida Pr	ofit Corporation	
The enclosed Certificate of C Entity" into a "Florida Profit	onversion. Articles Corporation" in acc	of Incorporation, a cordance with s. 60°	nd fees are submitted to convert an "Other I 7.1115. F.S.	3usines
Please return all corresponder	nce concerning this	matter to:		
<u>Katharine Sc</u>	hlien			
(Contact Person			
Buddy Custard	Inc.			
, t	irm/Company			
1730 S. Feder	al Huy #3	336		
Delray Bch.	F.L. 33° State and Zip Code	483		
Katharine & Bu E-mail address: (10 be u	<i>Iclely Costar</i> sed for future annu	j (COM al report notification	n)	
For further information conce	erning this matter, p	lease call:		
Katharine Schli	en	ar (<u>561</u>)	789 - 3210 and Daytime Telephone Number	
Name of Contact	rerson	Area Code	and Daytime Telephone Number	
Enclosed is a check for the fo	llowing amount:			
□ \$105.00 Filing Fees ☑\$1 and C Statu	Certificate of	□\$113.75 Filing Fo and Certified Copy	ees	
STREET ADDRESS:			AILING ADDRESS:	
New Filings Section Division of Corporations			w Filings Section vision of Corporations	
Clifton Building			O. Box 6327	
2661 Executive Center Circle			llahassee, 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 Conv	ersion	is:	
Budy Custard, LLC L17- 62879 Enter Name of Other Business Entity	<u> </u>	17	
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.)	ABATARY O	DEC 28 P	r I
(Enter state, or if a non-U.S. entity, the name of the country)		Ή 4: 35	C
on March 20, 2017 Enter date "Other Business Entity" was first organized, formed or incorporated	7		
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws corganized, formed or incorporated:	of whic	ch it is	now
V/2			
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: Buddy Custami, Inc. Enter Name of Florida Profit Corporation			

Signed this day of	. 20 17
Required Signature for Florida Profit Corporation	<u>:</u>
Signature of Chairman, Vice Chairman, Director, Offi Incorporator: <u>Kathanie Schuen</u> Printed Name: <u>Kathania Schuen</u> Title: <u>Pr</u>	cer. or. if Directors or Officers have not been selected, an
Required Signature(s) on behalf of Other Business	Entity: [See below for required signature(s).]
Signature: <u>Kathaine Schuen</u>	
Printed Name: Katharine Schlien	Title: President
Signature:	
Printed Name:	Title:
Signature:	
Primed 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 <u>ALL</u> General Partners.	Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	
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)

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: Buddy of	Custard, Inc.
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
1730 S. Federal Hwy #336 Delray Bch, Fl. 33483	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
Buddy Custard is a sup	plemental pet food product
that aids in the recovery	of animals suffering
primarily with cancer.	
ARTICLE IV SHARES The number of shares of stock is: 5 million	
ARTICLE V INITIAL OFFICERS AND/OR DIR	ECTORS
Name and Title: Katharine Schlien/ Pro	
Address: 75 NE 5 AVE. Unit E	
Delray Bch, F1 33483	
Name and Title:	Name and Title:
Address:	
Name and Title: Robert Schlien / CEO	Name and Title:
Address: 75 NE 5 AVE, Unit E	Address:
Delray Bch, Fl. 33483	

ARTICLE VI REGISTERED AGENT	•
The <u>name and Florida street address</u> (P.O. Box NOT accepta	able) of the registered agent is:
Name: Katharine Schlich	
Address: 1730 S. Federal Huy # 336	
Delcay Boh, FL. 33483	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: Katharine Schlien	
Address: 1730 S. Tecleral Hwy #336	
Delray Och, FL. 33483	
*******************	************
Having been named as registered agent to accept service of pa this certificate, I am familiar with and accept the appointment	rocess for the above stated corporation at the place designated in t as registered agent and agree to act in this capacity
Kathanie Schlien	11 8 17 Date
Required Signature/Registered Agent	Date
	are true. I am aware that any false information submitted in a
document to the Department of State constitutes a third degre	e felony as provided for in s.817.155, F.S.
Kathanie Schnen Required Signature/Incorporator	11/8/17 Date
Required Signature/Incorporator	Date