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

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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACC	COUNT NO.	: 12000000195	
	F	REFERENCE	: 996297 7227993	
	AUTHO	RIZATION	: Spelle le man	
	CC	ST LIMIT		
ORDER DA	TE : Ja	ınuary 5,	2018	
ORDER TI	ME : 9	9:08 AM		
ORDER NO	. : 99	6297-010		
CUSTOMER	NO:	7227993		
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N.	AME:	MACROTRE	END CAPITAL GROUP,	
				ਹੈ ਹ
		EFFECTIV	'E DATE:	<u> </u>
C	ERTIFICA	OF INCORP TE OF LIM OF ORGANI	HITED PARTNERSHIP	-5 AT 10:
PLEASE R	ETURN TH	IE FOLLOWI	NG AS PROOF OF FILING:): 3 _!
	CERTIFIE			
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СОИТАСТ	PERSON:	Roxanne	Turner - EXT.	

EXAMINER'S INITIALS:

COVER LETTER

Tallahassee, FL 32301

	Charter Section Division of Co							
SUBJEC	ManeaTenn	d Capital Group Inc.						
SOBJEC	· · · · · · · · · · · · · · · · · · ·	Name of	Resulting Flo	rida Profit	Corporation	•		
		e of Conversion, Articles Profit Corporation" in ac			tes are submitted to conve 15, F.S.	ert an "C	Other B	usiness
Please re	turn all corresp	pondence concerning this	s matter to:					
Gregory 1	ustig							
		Contact Person						
		Firm/Company						
220 NE 6	9th Circle							
		Address	,				[B]	
Boca Rate	on, Florida 3348	37				•	da da	
		City, State and Zip Code	e					•
grcg@ma	crotrendcapital,	com					- 3	
E-n	nail address: (t	to be used for future anni	ual report noti	fication)				
For furth	er information	concerning this matter,	please call:					
David Kli	igler		561 at (672-8	331			
	Name of Co	ontact Person	Are	a Code and	l Daytime Telephone Nur	nber		
Enclosed	is a check for	the following amount:						
S105. 6	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 Fili Division Clifton B	r ADDRESS: ngs Section of Corporation suilding ecutive Center	ns		New F Division P. O. I	ING ADDRESS: litings Section on of Corporations Box 6327 assee, FL 32314			

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:
MacroTrend Capital Group LLC
Enter Name of Other Business Entity
2. The "Other Business Entity" is a
(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)
October 16, 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 it is now organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
MacroTrend Capital Group Inc.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: (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 thisday of	, 20 ¹⁸
Required Signature for Florida Profit Corporation	<u>n:</u>
Signature of Chairman, Sice Chaman, Director, Off Incorporator: Printed Name: Gregor away attle: Chairm	ficer, or, if Directors or Officers have not been selected, an
Required Signature(s) on behalf of Other Business	s Entity: [See below for required signature(s).]
Signature: Just felle	
Printed Name: Kevin Gluckstal	Title: Member
Signature:	
Printed Name:	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative	
All others:	N2 10: 3
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 . The name of	I NAME the corporation shall be:	Group Inc.
	II PRINCIPAL OFFICE I place of business/mailing address is:	
	Principal street address	Mailing address, if different is:
10101 W. Sai	mple Road, Suite 425	
Coral Springs	s, Florida 33065	
ARTICLE The purpose	III PURPOSE for which the corporation is organized is:	
Any lawful p		3 <u>5</u>
		· · · · · · · · · · · · · · · · · · ·
		60 - 3
		<u> </u>
ARTICLE	IV SHARES 1,000,000 shares of Clase of Shares of Stock is:	s A common stock, par value \$0.001 per share
	V INITIAL OFFICERS AND/OR D	RECTORS
Name and T	Kevin Glockstal, CFO	Name and Title
Address:	5465 Wiles Road, #203	A.1.1
	Coconut Creek, Florida 33073	
Name and T	Gregory Lustig, Chairman of BOD	Name and Title:
Address:	itle: 220 NE 69th Circle	4.11
Address.	Boca Raton, Florida 33487	Address:
Manager 177	Richard Jordan, President	
Name and T	200 Basswood Lane	
Address:	Moreland Hills, Ohio 44022	Address:
	CIOCCIMIO IMIO, OMO TAVAL	

e <u>nam</u> e	e and Florida street address (P.O. Box NOT accepta	oie) of the registered agent is:	
me:	Gregory Lustig	_	
dress:	220 NE 69th Circle	·	.
	Boca Raton, Florida 33487		:
	LE VII INCORPORATOR		
e <u>nam</u>	e and address of the Incorporator is:	<u> </u>	
me:	Gregory Lustig	· ω ·	
dress:	220 NE 69th Circle		
	Boca Raton, Florida 33487		
	een named us registered agent to accept service of pricate I m familiar with analycept the appointment		
			
-	co in Signature/Register of Agent	Date	
	co im Signature/Registered/Agent this document and affirm that the facts stated herein at to the Department of State constitutes a third degree	are true. I am aware that any false information :	submitted in a
	this document and affirm that the facts stated herein	are true. I am aware that any false information :	submitted in a