

P18000003593

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

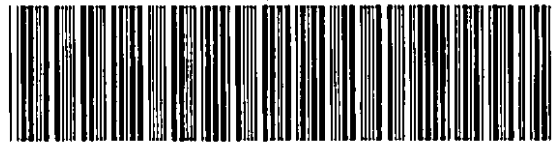
(Document Number)

Certified Copies _____

Certificates of Status _____

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18 JAN 11 AM 10:53

CLERK OF STATE
TAMM CENTER, #10007

T. BURCH
JAN 12 2018

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Nepka Inc.

Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

Austin Smith

Contact Person

Nepka Inc.

Firm/Company

2109 Lula Rd

Address

Minneola, FL 34715

City, State and Zip Code

asmith@nepka.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Austin Smith

at (385) 209-3813

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$105.00 Filing Fees | <input type="checkbox"/> \$113.75 Filing Fees
and Certificate of
Status | <input checked="" type="checkbox"/> \$113.75 Filing Fees
and Certified Copy | <input type="checkbox"/> \$122.50 Filing Fees,
Certified Copy, and
Certificate of Status |
|---|---|--|--|

STREET ADDRESS:

New Filings Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filings Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation

FILED
18 JAN 11 AM 10: 53

CLERK OF STATE
TALLAHASSEE, FLORIDA

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:

Nepka Inc.

Enter Name of Other Business Entity

2. The "Other Business Entity" is a S-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 Illinois
(Enter state, or if a non-U.S. entity, the name of the country)

on 01/30/2006

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:

N/A

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation:**

Nepka Inc.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: 1/1/2018

(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.

Signed this 1 day of January, 2018.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an

Incorporator: Austin Smith

Printed Name: Austin Smith Title: CFO

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: Austin Smith

Printed Name: Austin Smith Title: CFO

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$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: Nepka Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Principal street address

2109 Lula Rd

Minneola, FL 34715

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide management consulting services for companies in which the corporation holds equity, as well as other affiliated
entities, including but not limited to those in which are under consideration for future investment.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Abraham Hwang / CEO

Address: 2374 Highwood Ct.
Aurora, IL 60503

Name and Title: Austin Smith / CFO

Address: 2109 Lula Rd.
Minneola, FL 34715

Name and Title: _____

Address: _____

Name and Title: Kevin Doherty / COO

Address: 237 Amber Bluff St
Henderson, NV 89012

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Austin Smith
Address: 2109 Lula Rd.
Minneola, FL 34715

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Austin Smith
Address: 2109 Lula Rd
Minneola, FL 34715

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DEPT OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

1/1/2018
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Required Signature/Incorporator

1/1/2018
Date