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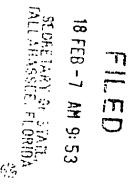
	_
(Requestor's Name)	
(Address)	_
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	7
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Office Use Only



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COVER LETTER

TO:	Charter Section Division of Co	rporations			
CHRI	ECT: EC AVIAT	ION GROUP, CORP.			
3000	r.C.1:	Name of	Resulting Florida	Profit	Corporation
		e of Conversion, Article Profit Corporation" in ac			ees are submitted to convert an "Other Business 15, F.S.
Please	return all corres	pondence concerning thi	s matter to:		
Indyar	a Catramby Andio	n Piquet			
		Contact Person			
Piquet	Law Firm PA				
		Firm/Company			
1000 I	Brickell Avenue, Si	uite 201			
		Address			
Miami	, Florida 33131				
	· · · · · · · · · · · · · · · · · · ·	City, State and Zip Cod	· ·		
janini@	ēpiquetlawfirm.co	m			
i	E-mail address: (t	o be used for future ann	ual report notificat	ion)	
For fu	rther information	concerning this matter,	please call:		
Indyara Catramby Andion Piquet		786 at (558-8	054	
	Name of Co	ontact Person		de anc	Daytime Telephone Number
Enclos	sed is a check for	the following amount:			
S \$10	5.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	☐\$113.75 Filing and Certified Co		☐\$122.50 Filing Fees. Certified Copy, and Certificate of Status
New F Division Clifton 2661 I	ET ADDRESS: Tilings Section on of Corporation a Building Executive Center assee, FL 32301	Circle	; 1	New F Divisio P. O. E	ING ADDRESS: illings Section on of Corporations Box 6327 assee, 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:				
ECAVIATION GROUP, LLC UT-207837				
Enter Name of Other Business Entity				
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.)				
first organized, formed or incorporated under the laws of FLORIDA				
(Enter state, or if a non-U.S. entity, the name of the country)				
OCTOBER 9, 2017				
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 <u>attached Articles of Incorporation</u> : EC AVIATION GROUP, CORP.				
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				

Page 1 of 2

18 FEB -7 AM 9:53
SECREJARY OF STATE
ALL AHASSEE FLORIDA

Signed thisday ofday of	. 20 18	
Required Signature for Florida Profit Corporation		
Signature of Chairman, Vice Chairman, Director, O Incorporator: ————————————————————————————————————	fficer, or, if Directors or Officers have no	nt been selected, an
Required Signature(s) on behalf of Other Busine		.ture(s).]
Signature: 1/web ///		
Printed Name: Eduardo Eidt Letti	Title: Member/Manager	
Signature: Untia Pery Lite		
Printed Name: Cintia Pires Letti	Title: Member/Manager	
Signature:	· •	
Printed Name:	Title:	<u>.</u>
Signature:		
Printed Name:		**** / 10
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	9: 53
If Florida General Partnership or Limited Liabil Signature of one General Partner.	ity Partnership:	A. A.
If Florida Limited Partnership or Limited Liabil Signatures of <u>ALL</u> General Partners.	ity Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representativ	e.	
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)	

Page 2 of 2

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

ARTICLE I NAME EC AVIATION GROUP	P CORP			
The name of the corporation shall be:	. cont,			
ARTICLE II PRINCIPAL OFFICE	·			
The principal place of business/mailing address is:				
Principal street address	Mailing address, if different is:			
1000 Brickell Avenue, Suite 201				
1000 Bickett Aveilde, Suite 201	same as principal			
Miami, FL 33131				
ARTICLE III PURPOSE The purpose for which the corporation is organized is:				
The corporation shall engage in any activity and all lawful busin	ness permitted under the laws of the United States and the			
State of Florida.				
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	B33-			
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	9: 5 0RI			
ARTICLE IV SHARES The number of shares of stock is:				
The number of shares of slock is.				
ARTICLE V INITIAL OFFICERS AND/OR DIRE	ECTORS			
Name and Title: Eduardo Eidt Letti - Pres/Treasurer/Director	Cintia Pires Letti - Secretary/Director			
Address: 1000 Brickell Avenue, Suite 201	Address: 1000 Brickell Avenue, Suite 201			
Miami, FL 33131	Miami, FL 33131			
Name and Title:	Name and Title:			
Address:	A 11			
Address:	Address:			
Name and Title	Name and Title			
Name and Title:	Name and Title:			
Address:	Address:			

ARTICL	E VI REGISTERED AGENT	
The name	and Florida street address (P.O. Box NO	OT acceptable) of the registered agent is:
Name:	Professional Corporate Services, LLC	
Address:	1000 Brickell Avenue, Suite 201	_
	Miami, FL 33131	_
ARTICL	E VII INCORPORATOR	
The <u>name</u>	and address of the Incorporator is:	
Name:	Eduardo Eidt Letti	
Address:	1000 Brickell Avenue, Suite 201	
	Miami, FL 33131	
		·
******	**********	********************************
Having be this certify	ven named as registered agent to accept so içtife, I any familiar with and accept the ap	rvice of process for the above stated corporation at the place designated in pointment as registered agent and agree to act in this capacity
		01/04/2018
	Required Signature/Registered Agent	Date
		tted herein are true. I am aware that any false information submitted in a
аоситет	to the Department of State constitutes a ti	hird degree felony as provided for in s.817,155, F.S.
	1- Junito III	01/04/20,8
	Required/Signature/Incorporator	Date

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