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(Re	questor's Name)	
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(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu:	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
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Office Use Only



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18 HAY -8 AN II: 15
SECKETARY OF STATE
AHASSEE FLORIDA

MAY 09 2018 T.SCHROEDER

COVER LETTER

- •	19					
TO:	Charter Section Division of Con	rporations				
CHIDI	MZA INTE	RNATIONAL REALTY II	NC			
SODS	EC1	Name of	Resulting Florida	Profit	Corporation	
		e of Conversion, Articles Profit Corporation" in ac			ees are submitted to convert an "Other Busine 15, F.S.	:SS
Please	return all corresp	ondence concerning this	s matter to:			
MARI	ANO MAZZA					
		Contact Person				
MZA	INTERNATIONAL	L REALTY				
		Firm/Company				
3716 N	NE 168 ST # 403					
		Address				
NORT	Н МІАМІ ВЕАСЬ	H, FL 33160				
		City, State and Zip Code	e			
mariar	oo.mazza@gmail.co	om				
	E-mail address: (t	o be used for future anni	ual report notificat	ion)		
For fu	rther information	concerning this matter,	please call:			
MARI	ANO MAZZA		_at (60380	25	
	Name of Co	ontact Person	Area Co	de and	1 Daytime Telephone Number	
Enclo	sed is a check for	the following amount:				
= \$10	05.00 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 Divisi Clifto 2661	ET ADDRESS: Filings Section on of Corporation in Building Executive Center classee, FL 32301	Circle] 1 1	New F Divisio P. O. E	ING ADDRESS: illings Section on of Corporations Box 6327 assec, 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:
MZA INTERNATIONAL REALTY LLC LILE - 189512
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
(Enter state, or if a non-U.S. entity, the name of the country)
10/13/2016 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> :
MZA INTERNATIONAL REALTY 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

18 MAY -8 AMIL: 15
SECRETARY OF STATE
ALL AHASSEE, FLORID,

Signed this day of APRIL	, 20_18	
Required Signature for Florida Profit Corporation:		
Signature of Chairman, Vice Chairman, Director, Office Incorporator: Printed Name: MARIANO MAZZA Title: PRESIDI	er, or, if Directors or Officers have not bee	en selected, an
Required Signature(s) on behalf of Other Business E	ntity: [See below for required signature(s).]
Signature:	-	-
Printed Name: MARIANO MAZZA	_ Title:	•
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 I Signature of one General Partner.	Partnership:	
If Florida Limited Partnership or Limited Liability I	imited Partnership:	
Signatures of <u>ALL</u> General Partners.		⊼is _
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		8 MAY -8 AM I: ECRETARY OF STATE LLAHASSEE, FLOR
All others:		-8 ARY SSE
Signature of an authorized person.		유유
Fees: Certificate of Conversion:	\$35.00	STAT LORI

\$8.75 (Optional) \$8.75 (Optional)

\$70.00

Fees for Florida Articles of Incorporation:

Certified Copy: Certificate of Status:

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

ARTICLE I NAME MZA INTERNATIO	ONAL REALTY INC.	
The name of the corporation shall be:		
ARTICLE II PRINCIPAL OFFICE		
The principal place of business/mailing address is:		
Principal street address	Mailing address, if differen	nt is:
12864 BISCAYNE BLVD # 151		-
NORTH MIAMI, FL 33181		
ARTICLE III PURPOSE The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS		
	A	18 MA
	S	N - 0
	יים	9 ₹ M
		<u>~ </u>
		<u> </u>
ARTICLE IV SHARES The number of shares of stock is:		
ARTICLE V INITIAL OFFICERS AND/OR D	IRECTORS	
Name and Title: MARIANO MAZZA. PRESIDENT	Name and Title:	
Address: 12864 BISCAYNE BLVD # 151	Address:	
NORTH MIAMI, FL 33181		
Name and Title:	Name and Title:	
Address:	Address:	
N. ATTO		
Name and Title:	Name and Title:	
Address:	Address:	

The name	<i>E VI REGISTERED AGENT</i> and Florida street address (P.O. Box N	OT acceptable) of the registered agent is:
	MARIANO MAZZA	or acceptable, of the registered agent is.
Name:	12864 BISCAYNE BLVD # 151	_
Address:	NORTH MIAMI, FL 33181	
ARTICL.	E VII INCORPORATOR and address of the Incorporator is:	
Name:	MARIANO MAZZA	
Address:	12864 BISCAYNE BLVD # 151	
	ORTH MIAMI, FL 33181	
******	***********	********
		service of process for the above stated corporation at the place designated is ppointment as registered agent and agree to act in this capacity
	un in	4/19/2018
	Required Signarure/Registered Agent	Date
		tated herein are true. I am aware that any false information submitted in third degree felony as provided for in \$.817.155, F.S.
	Mylings	4/19/2018
	Required Signature/Incorporator	Date

FILED

18 MAY -8 AM II: 15

SLCRETARY OF STATE FALLAHASSEE, FLORIDA