

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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MOON MAY 2 9 2018

TO: Charter Section Division of Corporations

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SUBJECT:___

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:

VINCENZO FRAIETTA

Contact Person

Firm/Company

8634 NW 59TH PLACE

Address

PARKLAND, FL 33067

City. State and Zip Code

MARC1040@AOL.COM

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

954

and Certified Copy

at (______

For further information concerning this matter, please call:

VINCENZO FRAIETTA

Name of Contact Person

Area Code and Daytime Telephone Number

Certified Copy, and

Certificate of Status

752-3889

□\$113.75 Filing Fees ■\$122.50 Filing Fees.

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Enclosed is a check for the following amount:

□ \$105.00 Filing Fees 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 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: VED NUETD & INC.

VEP NUTRA, INC.	F15 000 3203	F15 000 3503				
	Enter Name of Other Business Entity	·=- c=	<u></u>			
2. The "Other Busines	CORPORATION Entity" is a		3	₁ ,		
(Ent	(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)	2(11 22			
first organized, formed	or incorporated under the laws of <u>NEVADA</u> (Enter state, or if a non-U.S. entity, the name of the country)		MA S:			
on	· · · · · · · · · · · · · · · · · · ·		<u>ار،</u>			
in the second	and a survey of the Development Provide Strength Contractional Contraction of the strength of the strength of the	1				

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:

FLORIDA

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

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	30	APRIL	18
Signed this	day of		20

Required Signature for Florida Profit Corporation:

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

Signature:		:		
Printed Name: VINCENZO FRAIETTA	Title:		18 MA	,
Signature:		- •		744 777
Printed Name:	Title:		2 21	
Signature:			çò	
Printed Name:	Title:		<u>ري</u>	
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.				
<u>All others:</u> Signature of an authorized person.				
<u>Fees:</u> 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)

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ARTICLE I NAME

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The name of the corporation shall be: _____

<u>ARTICLE II</u> PRINCIPAL OFFICE The principal place of business/mailing address is:

Principal street address	Mailing address, if different is: $\approx q$.	<u></u>	
8634 NW 59TH PLACE		18 MAY 22	
PARKLAND, FL 33067		22	,
ARTICLE III PURPOSE		An.	
The purpose for which the corporation is organized is:		÷	
WEBSITE CONSULTING		5	
		<u> </u>	

ARTICLE IV SHARES

ARTICLE IV SHARES The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title	VINCENZO FRAIETTA , PRESIDENT	Name and Title:
Address:	8634 NW 59TH PLACE	Address:
	PARKLAND, FL 33067	
Name and Title	2:	Name and Title:
Address:		Address:
Name and Title		Name and Title:
Address:	<u> </u>	Address:

$\frac{1}{2} \left(\frac{1}{2} - \frac{1}{2} \right) = \frac{1}{2} \left(\frac{1}{2} - \frac{1}{2} \right) \left(\frac{1}{2}$

ARTICLE VI_ REGISTERED AGENT

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

Name: VINCENZO FRAIETTA Address: 8634 NW 59TH PLACE

PARKLAND, FL 33067

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

VINCENZO FRAIETTA Name:

8634 NW 59TH PLACE

Address:

PARKLAND, FL 33067

18 HAY 22 AH 5: 52

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

04-30-2018

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

04-30-2018

Date