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(Re	questor's Name)	
(11	,	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only

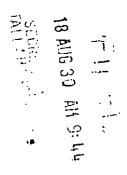
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COVER LETTER

TO:	Charter SectionDivision of Corpor	ations							
end n	rot.	NORAK TRANSLAT	IÓNS C	ORP					
SUBJ.	Name of Resulting Florida Profit Corporation								
		Conversion, Articles				ees are submitted to conve 15, F.S.	ert an "O	ther Bu	ısines
Please	return all correspond	lence concerning this	s mattei	r to:					
	MIC	HELLE WILLIAMS							
		Contact Person			_				
DEMO	S GLOBAL GROUP.	INC.					≓.;;	هيد	
	<u> </u>	Firm/Company			_			9 VUG	i.
	7300 N	ORTH KENDALL DI	RIVE, S	UITE 470)			330	1
		Address			_		-	À.H	•
	M	IAMI, FL 33156					ø	5. 1. t	÷
	City	, State and Zip Code	2		_			4-	
		m@demosglobal.es							
H	E-mail address: (to be	used for future annu	ial repo	ort notific	ation)				
For fu	rther information con	cerning this matter, p	please o	call:					
N	HCHELLE WILLIAM	S	at (305	670 0	979			
	Name of Conta	ct Person	_ `	Area (Code and	d Daytime Telephone Nun	nber		
Enclos	sed is a check for the	following amount:							
S \$10		\$113.75 Filing Fees d Certificate of atus		3.75 Fili ertified C	_	□\$122.50 Filing Fees, Certified Copy, and Certificate of Status			
New F Division Cliftor	ET ADDRESS: ilings Section on of Corporations a Building Executive Center Circ	de			New F Division P. O. I	ING ADDRESS: Cilings Section on of Corporations Box 6327 assec. FL 32314			

Tallahassee, Fl. 32301

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 o	of Conversion is:
NORAK TRANSLATIONS LLC 4170	2070766
Enter Name of Other Business Entity	<u>===</u>
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY	
(Enter entity type. Example: limited liability company, limited partners general partnership, common law or business trust, etc.)	ship.
first organized, formed or incorporated under the laws of FLORIDA (Enter state, or if a non-U.S. entity, the name of the country)	
03/28/2017 on	
Enter date "Other Business Entity" was first organized, formed or incorpo	 orated
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the organized, formed or incorporated:	<u>_</u> .
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorpo</u>	ration:
NORAK TRANSLATIONS 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 docume Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirement listed as the document's effective date on the Department of State's records.	•
Page 1 of 2	18 AUG 30
) ÁH 9:

Signed this 24th day of Duyst	. ₂₀ \2			
Required Signature for Florida Profit Corporation:				
Signature of Chairman, Vice Chairman, Director, Offic Incorporator: Printed Name: Title:	eer, or, if Directors or Officers have not been sel	ected, an		
Required Signatures) on behalf of Other Business 1				
Signature: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
Printed Name: OELLER, STEPHANG)	Title: MGR			
Signature: 15 to /bs/c				
Printed Name: MAZA RUIZ, MARIA MANUELA	Title: MGR			
Signature:				
Printed Name:				
Signature:				
Printed Name:	Title:	=		
Signature:		VI. 1.	SIN 8	- i :
Printed Name:			JG 30	سبب دسبب ا
Signature:		•	o an	;
Printed Name:		43		;·
If Florida General Partnership or Limited Liability Signature of one General Partner.	Partnership:	4,	કુ: I, I	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	Limited Partnership:			
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.				
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)

RTICLE I	I PRINCIPAL OFFICE		
	place of business/mailing address is:		
7	Principal street address 300 NORTH KENDALL DRIVE		Mailing address, if different is: PO BOX 560668
	SUITE 470		MIAMI, FL 33256-0668
	MIAMI, FL 33156		
	II PURPOSE for which the corporation is organized is: LL LAWFUL BUSINESS.		
			MUG AUG
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	V SHARES 1000 of shares of stock is:		ra F
RTICLE I ne number o RTICLE	of shares of stock is: 1000 V INITIAL OFFICERS AND/OR DIF	RECTORS	(1) F
ne number o	of shares of stock is: V INITIAL OFFICERS AND/OR DIP STEPHANG OFFICER P/S		MADIA MANUELA MAZA DIUZ M
ne number o RTICLE ame and Tit	of shares of stock is: V INITIAL OFFICERS AND/OR DIF STEPHAN G OELLER, P/S		MARIA MANUELA MAZA RUIZ. V
ne number o	of shares of stock is: 1000 V INITIAL OFFICERS AND/OR DIF tle: STEPHAN G OELLER, P/S 7300 NORTH KENDALL DRIVE,#470 MIAMI, FL 33156	Name and Title	MARIA MANUELA MAZA RUIZ. V 7300 NORTH KENDALL DRIVE,#470 MIAMI, FL 33156
ne number of RTICLE of the and Tited Indicates the and Tited Idress:	of shares of stock is: 1000 V INITIAL OFFICERS AND/OR DIF STEPHAN G OELLER, P/S 7300 NORTH KENDALL DRIVE,#470 MIAMI, FL 33156	Name and Title Address:	MARIA MANUELA MAZA RUIZ. V 7300 NORTH KENDALL DRIVE,#470 MIAMI, FL 33156
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ne number of RTICLE Anne and Tital Idress:	of shares of stock is: 1000 V INITIAL OFFICERS AND/OR DID tle: 7300 NORTH KENDALL DRIVE,#470 MIAMI, FL 33156 tle:	Name and Title Address: Name and Title Address:	MARIA MANUELA MAZA RUIZ. V 7300 NORTH KENDALL DRIVE.#470 MIAMI, FL 33156
ne number of RTICLE 11 ame and Tit Idress: me and Tit Idress:	of shares of stock is: 1000 V INITIAL OFFICERS AND/OR DIF STEPHAN G OELLER, P/S 7300 NORTH KENDALL DRIVE,#470 MIAMI, FL 33156 tle:	Name and Title Address: Name and Title Address:	MARIA MANUELA MAZA RUIZ. V 7300 NORTH KENDALL DRIVE.#470 MIAMI, FL 33156

ARTICL	E VI REGISTERED AGENT	
The name	e and Florida street address (P.O. Box NOT	acceptable) of the registered agent is:
Name:	DEMOS GLOBAL GROUP INC	
Address:	7300 NORTH KENDALL DR. #470	
	MIAMI, FL 33156	
ARTICL	E VII INCORPORATOR	
The <u>name</u>	e and address of the Incorporator is:	
Name:	ARMANDO M. MARTINEZ	
Address:	7300 NORTH KENDALL DR. #470	
	MIAMI, FL 33156	
******	**********	*******
Having be this certife	een named as registered agent to accept serv icate, I am familiar with and accept the appo	cice of process for the above stated corporation at the place designated in pintment as registered agent and agree to act in this capacity
	1 Mat	08/24/18
	Required Signature/Registered Agent	Date
I submit t	this dogument and affirm that the facts state	ed herein are true. I am aware that any false information submitted in a rd degree felony as provided for in s.817.155, F.S.
	Prints: It is	08/24/18
	Required Signature/Incorporator	Date

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