P18000095712

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UI	P WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of S	Status
Special Instructions	s to Filing Officer:	
		Status

Office Use Only



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07/10/18--01008--001 **35.00

11/28/18--01003--030 **75.00

SELPLYARY OF STATE
VIEW OF STATE

NOV 26 2018

D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: A & L TOOLINGS, LLC		
DOCUMENT NUMBER: L 1600 129358		
The enclosed Articles of Amendment and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Name of Contact Person PSR Salution Center IIC Firm/ Company 13391 Rity Civole Address Address City/ State and Zip Code E-mail address: (to be used for future annual report notification)	is or host of	
For further information concerning this matter, please call:	5: 43	1 BESTATIONS
Name of Contact Person at (40) 923-045 Area Code & Daytime Telephone Number		_
Enclosed is a check for the following amount made payable to the Florida Department of State:		
□ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee		

Mailing Address

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

Street Address

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

Al toling inc'
To whom my lonan'.

This payment is to Simisted the process to chank to a corporation.

I received a letter by mail that the only thing need it was a cleak.

Livo o 0/129358

Adt.
Ricardo Lapez
La C

Z018 KOY - 5 / 73 10: 1



RECEIVED

18 SEP - 4 PM 12: 1.7

SEGRETARY OF STA TALLAHASSEE, FLOOR

FLORIDA DEPARTMENT OF STATE Division of Corporations

August 1, 2018

WILMARIS RIVERC P & R SOLUTION CENTER LLC 1339 RILEY CIRCLE DELAND, FL 32724

SUBJECT: A & L TOOLINGS, LLC Ref. Number: L16000129358

We have received your document for A & L TOOLINGS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

I'm sorry but I did not realize that you wanted to change from a LLC to a Corporation. You will need to complete the conversion application. Please see the attached.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 218A00015860

From 21c to corp (inc)

X we want to add the correct

nomes for the owners as

appeared on their id. X



September 7, 2018

WILMARIS RIVERA
P & R SOLUTION CENTER LLC
1339 RILEY CIRCLE
DELAND, FL 32724

SUBJECT: A & L TOOLINGS, LLC Ref. Number: L16000129358

We have received your document for A & L TOOLINGS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

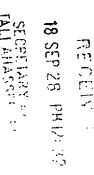
In order for you to change from a limited liability company to a corporation you must complete the attached forms.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 918A00018520





October 17, 2018

WILMARIS RIVERC P & R SOLUTION CENTER LLC 1339 RILEY CIRCLE DELAND, FL 32724

SUBJECT: A & L TOOLINGS, LLC Ref. Number: L16000129358

We have received your document for A & L TOOLINGS, LLC and your check(s) totaling \$35.00. However, the document has not been filed and is being retained in this office for the following:

The fee to file this conversion is \$105.00. You have paid \$35.00 so there is a balance due of \$70.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 218A00021191

$\frac{Certificate\ of\ Conversion}{For}$

"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 Conversi	on is:	
A 91 trains 110		
Enter Name of Other Business Entity		
2. The "Other Business Entity" is a	3	<u>.</u>
first organized, formed or incorporated under the laws of \(1000000000000000000000000000000000000		: ا ا ا ا ا
on 07/05/2016	<u>그</u> 항	
on Enter date "Other Business Entity" was first organized, formed or incorporated	7 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	;n
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of worganized, formed or incorporated:		₹ W
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:		
Enter Name of Florida Profit Corporation		
5. If not effective on the date of filing, enter the effective date: CALTO (Zenson). (The effective date: Cannot be prior to nor more than 90 days after the date this document is filed Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date		

listed as the document's effective date on the Department of State's records.

Signed this 60 22 day of Sey Hembe	.20 18
Required Signature for Florida Profit Corporatio	
Signature of Chairman, Vice Chairman, Director, Of Incorporator: Printed Name: Decade: 12 Title: 12	ficer, or, if Directors or Officers have not been selected, an
Required Signature(s) on behalf of Other Busines	s Entity: [See below for required signature(s).]
Signature:	-
Printed Name: Licolo Lapez	Title:
Signature: Ormando Calapar	<u>e </u>
Printed Name:	Title: \mathcal{U} ,
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ity Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ity Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative	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)

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

The name of the corporation shall be:	Wlings, Inc.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	•
Principal street address	Mailing address, if different is: 340 Jan Field dx.
Suite 113	Sar Ford Fl 32771
Lunguova F1- 32750	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
Any and an Lawfull	bisiness.
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRE	CTORS
Name and Title: Ricardo A. Lopez Mek	Adviso-and Title:
Address: 349 Pourfield dx	Address:
Sarting E1. 35201	· · · · · · · · · · · · · · · · · · ·
	RoHS Name and Title:
Address: 208.60 5 Porkton dv.	Address:
Deltura Fl 32725	
lame and Title:	Name and Title:
ddress:	Address:

ARTICLE VI	T REGISTERED AGENT	
The name and	d Florida street address (P.O. Box NOT acceptable) of the registered agent is:	
Name: i	surrous Ruise PR Sentin Center	LLC
Address:	1339 Rilry Cucle	
<u></u>	Actord Fl 32724	
ARTICLE VI	TI INCORPORATOR	
	d address of the Incorporator is:	
Name: 1	Recorde Alopez Helmandy	
	sucy fairfield dr.	
S	January 71 32271	

	named as registered agent to accept service of process for the above stated con	
this certificate,	e. I am familiar with and accept the appointment as registered agent and agree	to act in this capacity
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
D _O	equired Signature/Registered Agent Date	(501×
Re	ista signature registere rigent	•
	document and affirm that the facts stated herein are true. I am aware that a he Department of State constitutes a third degree felony as provided for in s.8.	• •
	P-100 / - 100 09/27	120.50
Re	equired Signature/Incorporator Dat	. с С