

P180000098717

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

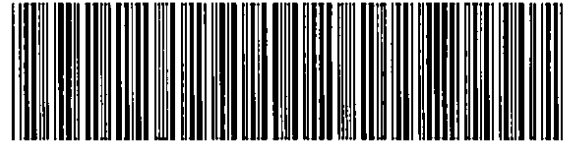
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700321262307

12/03/18--01018--002 **113.75

FILED
18 DEC -3 AM 5:51
ST. LOUIS, MO
U.S. DEPT. OF COMMERCE

DEC 3 2018

T SCHROEDER

COVER LETTER

TO: Charter Section
Division of Corporations
DREAM LION, INCORPORATED
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:

VLADIMIR GUSEV

Contact Person

NOT APPLICABLE

Firm/Company

12764 ATTRILL RD

Address

JACKSONVILLE, FLORIDA 32258

City, State and Zip Code

SUNBEAMINCOMETAX@GMAIL.COM

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

For further information concerning this matter, please call:

VLADIMIR GUSEV

904

567 - 7477

at (_____) _____

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$105.00 Filing Fees ☒ \$113.75 Filing Fees ☐ \$113.75 Filing Fees ☐ \$122.50 Filing Fees,
and Certificate of and Certified Copy Certified Copy, and
Status 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

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:
DREAM LION, INCORPORATED

Enter Name of Other Business Entity

CORPORATION

2. The "Other Business Entity" is a _____
(Enter entity type. Example: limited liability company, limited partnership,
general partnership, common law or business trust, etc.)

CALIFORNIA, USA

first organized, formed or incorporated under the laws of _____
(Enter state, or if a non-U.S. entity, the name of the country)

06/27/2017

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:

CALIFORNIA, UNITED STATES OF AMERICA

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation:**
DREAM LION, INCORPORATED

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.

FILED
18 DEC -3 AM 9:51
STATE OF FLORIDA
DEPARTMENT OF STATE

Signed this 29 day of NOVEMBER, 2018.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an

Incorporator: [Signature]

Printed Name: Aleksandra Burankova Title: OFFICER

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

Signature: [Signature]

Printed Name: ALEKSANDRA BURANKOVA Title: OFFICER

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 Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

FILED
18 DEC -3 AM 9:51
CLERK OF CIRCUIT COURT
JANUARY 1, 2019

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

ARTICLE I NAME DREAM LION, INCORPORATED

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 different is:

10310 SHADY CREST LN

10310 SHADY CREST LN

JACKSONVILLE, FLORIDA 32221

JACKSONVILLE, FLORIDA 32221

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFULL BUSINESS.

ARTICLE IV SHARES 1000

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Aleksandra Burankova, Director

Address: 10310 SHADY CREST LN

JACKSONVILLE, FL 32221

Name and Title: Ibrahim Aliyev, Treasurer

Address: 10310 SHADY CREST LN

JACKSONVILLE, FL 32221

Name and Title: Aleksandra Burankova, President

Address: 10310 SHADY CREST LN

JACKSONVILLE, FL 32221

Name and Title: _____

Address: _____

Name and Title: Aleksandra Burankova, Secretary

Address: 10310 SHADY CREST LN

JACKSONVILLE, FL 32221

Name and Title: _____

Address: _____

FILED
18 DEC -3 AM 9:51
JACKSONVILLE, FLORIDA
CLERK OF DISTRICT COURT

ARTICLE VI REGISTERED AGENT

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

Name: VLADIMIR GUSEV
Address: 12764 ATTRILL RD
JACKSONVILLE, FL 32258

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: ALEKSANDRA BURANKOVA
Address: 10310 SHADY CREST LN
JACKSONVILLE, FL 32221

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

11/29/2018
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

11/29/2018
Date

FILED
18 DEC -3 AM 9:51
CLERK OF THE COURT
JACKSONVILLE, FL