

P19000006313

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

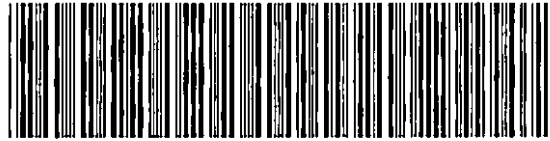
Special Instructions to Filing Officer:

Office Use Only

W19-6662

M. MOON

JAN 23 2019



600323369476

600323369476
01/17/19--01007--016 **105.00

19 JAN 17 AM 11:42

FILED
19 JAN 17 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

MIL 100, Inc.

FILED
19 JAN 17 AM 8:57
SECRET
TALLAHASSEE, FL 32301

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

Signature _____

Requested by: SETH

01/18/19

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

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:

Mil 100, Inc.

Enter Name of Other Business Entity

2. The "Other Business Entity" is a corporation

(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 State of Delaware

(Enter state, or if a non-U.S. entity, the name of the country)

on February 18, 2015

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 **attached Articles of Incorporation**:

Mil 100, 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.

FILED
19 JAN 17 AM 8:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signed this 17th day of January, 2019.

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: Walter Wainstein Title: Director

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

Signature: [Signature]

Printed Name: Walter Wainstein Title: Director

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.

FILED
19 JAN 17 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be: Mil 100, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

1390 Brickell Avenue suite 200

7401 Palomino Dr. Apt 117

Miami FL 33131

Hollywood FL 33024

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Hold title of property in Florida

FILED
19 JAN 17 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Andrea Karina Bertolasi/President

Name and Title: _____

Address: 1390 Brickell Avenue suite 200
Miami FL 33131

Address: _____

Name and Title: Walter Wainstein/Director

Name and Title: _____

Address: 7401 Palomino Dr. Apt 117
Hollywood FL 33024

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: OVERSEAS SOLUTIONS CORPORATION

Address: 1390 Brickell Avenue suite 200
Miami FL 33131

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: OVERSEAS SOLUTIONS CORPORATION

Address: 1390 Brickell Avenue suite 200
Miami FL 33131

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

Nicole Delance
Required Signature/Registered Agent

01/17/2019

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.

Nicole Delance
Required Signature/Incorporator

01/17/2019

Date

SIGNED BY NICOLE DELANCE AUTHORIZED REPRESENTATIVE OF
OVERSEAS SOLUTIONS CORPORATION

FILED
19 JAN 17 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA