# P1900012766

(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:				
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CO	VER	LET	TER

2661 Executive Center Circle

Tallahassee, FL 32301

TO:	Charter Section Division of Cor			,	
CHDI	ECT:	Akos	tar, Inc.	•	
	FAC 1	Name of R	esulting Florida Pro	ofit Corporation	
		e of Conversion, Articles Profit Corporation" in acc		nd fees are submitted to convert an "Other B .1115, F.S.	lusiness
Please	return all corresp	ondence concerning this	matter to:		
	Charisma	Bogue Contact Person			
		Contact Person			
<u> </u>	AKUSTAN	<b>Inc.</b> Firm/Company			
		Firm/Company			
	121 Cosp	Address	· Uhit A		
		Address			
	Venice	FL 3428	5		
-		City, State and Zip Code			
		gue @ akos. o be used for future annua		1)	
		concerning this matter, p	•		
10110		-		274-0464	
-	Name of Co	ontact Person	Area Code	774 - 0464 and Daytime Telephone Number	
Enclo:	sed is a check for	the following amount:		•	
<b>□</b> \$10	95.00 Filing Fees	- C	□\$113.75 Filing Fe and Certified Copy	•	
New f Divisi	ET ADDRESS: Filings Section on of Corporation Building	ıs	Ne Div	w Filings Section vision of Corporations O. Box 6327	

Tallahassee, FL 32314

From:

Akostar, Inc. 121 Corporation Way Unit A Venice, FL 34285

Charisma Bogue
Phone in FL: 724-774-0464
cbogue@akostar.com

Feb 5, 2019

Hello,

I am writing to register my Pennsylvania sub chapter S-Corp in FL.

· convert other busides

entiry into Profit

corporation

Please assist me, I am new to all this @

I included a check, and the forms, and a copy of my Articles of Incorporation from PA

>>> If this is complete, then please process, thank you

>>>> if something is missing, or incomplete, then I apologize and ask for your assistance to how I can correct or make it right

Below is my contact information, please contact me if you have any questions.

Thank you kindly for your helpful assistance, it is appreciated.

Best regards,

Ma

Charisma Bogue

President of Akostar, Inc.

Charisma Bogue
Phone in FL: 724-774-0464
cbogue@akostar.com

Akostar, Inc. 121 Corporation Way Unit A Venice, FL 34285

### **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 En	tity" immediately pri	ior to th	e filing of this Certif	icate of Conversion	on is:
A	Kostar, Inc.	•			
	Enter Name of Ot		siness Entity		
2. The "Other Business Entity" is a	Sub chapter	2	Corportion	<u>,                                      </u>	
(Enter entity type	e. Example: limited ship, common law or	l liabilit	y company, limited p	eartnership,	
first organized, formed or incorporated (Enter st	under the laws ofate, or if a non-U.S.	Pentity, t	he name of the count		
on JAN - 22 -					
	Business Entity" wa	ıs first o	rganized, formed or	incorporated	
3. If the jurisdiction of the "Other Busin organized, formed or incorporated:	ness Entity" was cha	inged, th	ne state or country un	der the laws of wh	hich it is now
4. The name of the Florida Profit Corpo	oration as set forth in	the <u>att</u>	ached Articles of In	corporation:	
AKOSTAR, IAC.					
Akostar, Inc.	Enter Name of Flor	ida Prot	it Corporation	<del></del>	
5. If not effective on the date of filing,	enter the effective da	ate:			
(The effective date: Cannot be prior Department of State.) Note: If the date inserted in this block of					
listed as the document's effective date of					

Page 1 of 2

19 FEB - 7 PM 2: 28

	,	,		
Signed this	<u>day of</u>	February	. 20_19	
Required Signatu	ure for Florida	Profit Corporation:		
			er. or, if Directors or Officers have not bee	n selected, an
Required Signatu	ure(s) on behal	f of Other Business I	Entity: [See below for required signature(s	<b>).</b> ]
Signature:				
			Title: Pres.	
Signature:				
Printed Name:			Title:	
Signature:				
Printed Name:		· · · · · · · · · · · · · · · · · · ·	Title:	
Signature:				
Printed Name:			Title:	
Signature:	·			
Printed Name:			Title:	
Signature:				
Printed Name:			Title:	
If Florida General Signature of one G		or Limited Liability	Partnership:	
If Florida Limite Signatures of AL			Limited Partnership:	
If Florida Limite		npany: ized Representative.		19 FI SEUN FALLA

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:

\$35.00 \$70.00

Fees for Florida Articles of Incorporation: Certified Copy:

Certificate of Status:

\$8.75 (Optional) \$8.75 (Optional)

PM 2: 28

(7)

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

The name of the corporation shall be:	ostar, Inc.
	<del></del>
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
121 Corporation Way	Ivianing address, if different is.
Unit A	- SAME-
Venice, FL 34285	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	
AKOStar is a technology	company that develops,
Manufactures, and mark	company that develops,
Control products	
1 3 3 3 3 3	
	AF B
	-7 PM
ADMYGLE W. GUADEG	
ARTICLE IV SHARES The number of shares of stock is: 100,000	9: 2: Online
ARTICLE V INITIAL OFFICERS AND/OR DIRE	ectors
Name and Title: Charisma Bogue, Pres	
Address: 20219 Granlago Dr	Address:
Venice FL, 34293	
Name and Title:	Name and Title:
Address:	Address:
Name and Title://	Name and Title:
Address:	Address:

ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:	
Name: Charisma Bogue	
Address: 121 Corporation Way, Unit A	
Venice, FL 34285	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Name: Chasisma Bogue	
Address: 121 Corporation Way, Unit A  Venice FL 34285	
Venice FL 34285	
***********************	
Having been named as registered agent to accept service of process for the above stated corporation at the this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this continues.	
Required Signature/Registered Agent Feb 5, 2019  Date	
Required Signature/Registered Agent Date	
I submit this document and affirm that the facts stated herein are true. I am aware that any false inform	ation 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  Peb 5, 2019  Date	
Required Signature/Incorporator Date	