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(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use On	lv



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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO: Charter Section

llahassee, FL 32301

Division of Corporations

SUBJECT: 360 Financial	Solutions, Inc.					
SUBJECT:	Name of I	Resulting Flo	rida Profit	Corporation		
The enclosed Certificate of Entity" into a "Florida Pro				ees are submitted to convert an "C 15, F.S.	Other Bus	iness
Please return all correspon	ndence concerning this	matter to:				
Lorne Wray						
	Contact Person					
360 Financial Solutions, Inc	<u>:</u> .					
	Firm/Company				19 F	SIA!(
370 W. Camino Gardens Bl	vd., #330				EB 20	ON OF
	Address					CORP.
Boca Raton, Florida 33432					AH II: 5	OR ATH
C	ity. State and Zip Code	•			£	SKS.
lorne.wray@gmail.com						
E-mail address: (to	be used for future annu	al report noti	fication)			
For further information co	oncerning this matter, [olease call:				
Lorne Wray		561 at (405-1.	309		
Name of Con	tact Person	_ \	a Code and	I Daytime Telephone Number		
inclosed is a check for th	ne following amount:					
	■\$113.75 Filing Fees and Certificate of Status	□\$113.75 F and Certific	-	☐\$122,50 Filing Fees, Certified Copy, and Certificate of Status		
EREET ADDRESS: ew Filings Section lyision of Corporations ifton Building 61 Executive Center C			New F Division P. O. I	ING ADDRESS: Tlings Section on of Corporations Box 6327 assec, FL 32314		

<u>Certificate of Conversion</u> 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 Conversion is:
360 Financial Solutions, LLC
Enter Name of Other Business Entity
2. The "Other Business Entity" is a Limited Liability Company LIS 000 199368
(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
(Enter state, or if a non-U.S. entity, the name of the country)
November 25, 2015 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 is will organized, formed or incorporated:
N/A 20 97 A 20
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation: 360 Financial Solutions, Inc.
360 Financial Solutions, 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.

Page 1 of 2

Signed thisday of	20
Required Signature for Florida Profit Co	rporation:
Signature of Chairman, Vice Chairman, Direllineorporator: Lorne Wray Printed Name: Lorne Wray	ector, Officer, or, if Directors or Officers have not been selected, an e: Chairman/President/Director
Required Signature(s) on behalf of Other	Business Entity: [See below for required signature(s).]
Signature: Johns Many	
Printed Name: Lorne Wray	Title: Managing Member
Signature: Peeple St	into
Printed Name: Joseph Lents	
Printed Name:	Title:
Signature:	· · · · · · · · · · · · · · · · · · ·
	Title:
Signature:	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Printed Name:	Tid
Signature:	7 Title: 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Printed Name:	Title:
If Florida General Partnership or Limite Signature of one General Partner.	d Liability Partnership:
If Florida Limited Partnership or Limited Signatures of <u>ALL</u> General Partners.	d Liability Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representation	esentative.
All others: Signature of an authorized person.	
Certificate of Conversion: Fees for Florida Articles of Incorpo Certified Copy: Certificate of Status:	\$35.00 ration: \$70.00 \$8.75 (Optional) \$8.75 (Optional)

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

	itions, Inc.
name of the corporation shall be:	
PRINCIPAL OFFICE principal place of business/mailing address is:	
•	
Principal street address W. Camino Gardens Blvd., #330	Mailing address, if different is:
ta Raton, Florida 33432	(SAME ADDRESS)
TICLE III PURPOSE purpose for which the corporation is organized is:	
: Company is organized for any legal and lawful purpose	for which a for-profit corporation may be organized in the State of
rida. Including, but not limited to, Real Estate Developme	ent, owning and operating Commercial Real Estate Properties, and
naging both Rentals and Retail Properties. In addition to	the Real Estate, the Company plans to own and operate several
dit Repair Companies that may have offices in various St	ates in the United States as well as in the State of Florida.
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	£.
	£.
TICLE IV SHARES 25,000,000	£
TICLE IV SHARES enumber of shares of stock is:	G.
	RECTORS
TICLE V INITIAL OFFICERS AND/OR DI	
rnumber of shares of stock is: TICLE V INITIAL OFFICERS AND/OR DI me and Title: Lorne Wray, Chairman/CEO/BD 370 W. Camino Gardens Blyd., #330	IRECTORS Name and Title: Silva Alexandrov, President/BD, Sec/7 370 W. Camino Gardens Blvd. #330
rnumber of shares of stock is: 23,000,000 PTICLE V INITIAL OFFICERS AND/OR DI me and Title: Lorne Wray, Chairman/CEO/BD 170 W. Camino Gardens Blvd., #330 181 Iress:	Name and Title: Silva Alexandrov, President/BD, Sec/7 Address: 370 W. Camino Gardens Blvd., #330
rnumber of shares of stock is: TICLE V INITIAL OFFICERS AND/OR DI me and Title: Lorne Wray, Chairman/CEO/BD 370 W. Camino Gardens Blyd., #330	IRECTORS Name and Title: Silva Alexandrov, President/BD, Sec/7 370 W. Camino Gardens Blvd. #330
rnumber of shares of stock is: 23,000,000 PTICLE V INITIAL OFFICERS AND/OR DI me and Title: Lorne Wray, Chairman/CEO/BD 170 W. Camino Gardens Blvd., #330 181 Iress:	Name and Title: Silva Alexandrov, President/BD, Sec/T Address: Boca Raton, Florida 33432
rnumber of shares of stock is: CTICLE V	Name and Title: Silva Alexandrov, President/BD, Sec/7 Address: Boca Raton, Florida 33432 Name and Title:
rnumber of shares of stock is: CTICLE V	Name and Title: Silva Alexandrov, President/BD, Sec/7 Address: Boca Raton, Florida 33432 Name and Title: Address:
rnumber of shares of stock is: TICLE V	Name and Title: Silva Alexandrov, President/BD, Sec/7 Address: Boca Raton, Florida 33432 Name and Title: Address:
rnumber of shares of stock is: CTICLE V	Name and Title: Name and Title: Address: Boca Raton, Florida 33432 Name and Title: Address: Name and Title:

::	Lorne Wray		
ess:	370 W. Camino Gardens Blvd., #330		
	Boca Raton, Florida 33432		
	E VII INCORPORATOR		
iame	and address of the Incorporator is:		
2:	Lorne Wray		
ess:	370 W. Camino Gardens Blvd., #330		
	Boca Raton, Florida 33432		
	icate, I am familiar with and accept the appointmen	**************************************	ed i
		as registered agent and agree to act in this capacity	ed i
ertifi [] mit t	Required Signature/Registered Agent	Ecbruary 8, 2019 Date The are true. I am aware that any false information submitted	