P19000017347

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

Office Use Only



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COVER LETTER

TO: Charter Section Division of Corporat	tions					
SUBJECT: Pixel Acuity						
SOBJECT.	Name of	Resulting Floric	la Profit	Corporation		
The enclosed Certificate of C Entity" into a "Florida Profit				ees are submitted to convert an 15, F.S.	"Other Bu	siness
Please return all corresponde	ence concerning this	matter to:				
Eric Phileox						
	Contact Person		_			
Pixel Acuity						
1	Firm/Company					
555 Winderley Place					19	;; \$20
	Address				8.45.	Signal Stanti
Suite 300					J 25e	
City,	State and Zip Code	;			AH II: 34	ST ST
eaphilcox@me.com					34	110K 31K
E-mail address: (to be	used for future annu	al report notific	ation)			10
For further information conc	erning this matter.	olease call:				
Eric Philcox		917 at (445-9;	516		
Name of Contact	t Person		Code and	l Daytime Telephone Number		
Enclosed is a check for the fo	following amount:					
□ \$105.00 Filing Fees and State	Certificate of	□\$113.75 Fili and Certified (■\$122.50 Filing Fees, Certified Copy, and Certificate of Status		
STREET ADDRESS: New Filings Section Division of Corporations Clifton Building 2661 Executive Center Circl	e		New F Division P. O. E	ING ADDRESS: ilings Section on of Corporations Box 6327 assee, FL 32314		

Tallahassee, FL 32301

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:
Pixel Acuity LLC	L11000104122
1	Enter Name of Other Business Entity
2. The "Other Business Entity" is a limited	liability company
(Enter entity type. I	Example: limited liability company, limited partnership, o, common law or business trust, etc.)
first organized, formed or incorporated und	ler the laws of
(Enter state.	or if a non-U.S. entity, the name of the country)
09/09/2011 on	
Enter date "Other Bu	siness Entity" was first organized, formed or incorporated
3. If the jurisdiction of the "Other Business organized, formed or incorporated:	s Entity" was changed, the state or country under the laws of which it is now
4. The name of the Florida Profit Corporat	ion as set forth in the attached Articles of Incorporation:
Pixel Acuity INC	
Еп	tter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter (The effective date: Cannot be prior to r	o2/04/2019 er the effective date: 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 doe listed as the document's effective date on the	s not meet the applicable statutory filing requirements, this date will not be be be partment of State's records

Page 1 of 2

Signed thisday of	. 20_19
Required Signature for Florida Profit Corporation:	
Signature of Chairman, Vice Chairman, Director, Office	er, or, if Directors or Officers have not been selected, an
Printed Name: Eric Philcox Title: Chairman	er, or, if Directors or Officers have not been selected, an
Required Signature(s) on behalf of Other Business E	
Signature: Sur ley	
Printed Name: Eric Philcox	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	
If Florida General Partnership or Limited Liability Signature of one General Partner. If Florida Limited Partnership or Limited Liability 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: 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)

ARTICLE II PRINCIPAL OFF	
The principal place of business/mailing	address is:
Principal street address 555 Winderley Place Suite 300	Mailing address, if different is:
Maitland, FL 32751	
ARTICLE III PURPOSE	
The purpose for which the corporation	_
The purpose of the corporation is to engag	e in any lawful activity for which corporations may be incorporated in this state.
	
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ARTICLE IV SHARES The number of charge of steel in 100	4 1 1 : 3 L
ARTICLE IV SHARES The number of shares of stock is:	
	4H 11: 34
The number of shares of stock is: ARTICLE V INITIAL OFFICES Eric Philoxy Chairman	RS AND/OR DIRECTORS January Jan
The number of shares of stock is: ARTICLE V INITIAL OFFICER	RS AND/OR DIRECTORS
The number of shares of stock is: ARTICLE V INITIAL OFFICER Name and Title: Bric Philox, Chairman 30905 Lochmore Cir.	RS AND/OR DIRECTORS Name and Title: Manual Title: Manual Title: Name and Title:
The number of shares of stock is: ARTICLE V INITIAL OFFICER Name and Title: Eric Philcox, Chairman 30905 Lochmore Cir	RS AND/OR DIRECTORS Name and Title: Address: Alexandria, VA 22310
The number of shares of stock is: ARTICLE V INITIAL OFFICEF Name and Title: Eric Philcox, Chairman 30905 Lochmore Cir Sorrento, FL 32776 Name and Title:	RS AND/OR DIRECTORS Name and Title: Address: Alexandria, VA 22310 Name and Title:
The number of shares of stock is: ARTICLE V INITIAL OFFICER Name and Title: Eric Philcox, Chairman 30905 Lochmore Cir Sorrento, FL 32776	RS AND/OR DIRECTORS Name and Title: Address: Alexandria, VA 22310 Name and Title:
The number of shares of stock is: ARTICLE V INITIAL OFFICER Name and Title: Eric Philcox, Chairman 30905 Lochmore Cir Sorrento, FL 32776 Name and Title:	RS AND/OR DIRECTORS Name and Title: Address: Alexandria, VA 22310 Name and Title: Address:

	E VI REGISTERED AGENT and Florida street address (P.O. Box NOT acceptab	ole) of the registered agent is:	
Name:	Eric Philcox		
Address:	555 Winderley Place Suite 300		
Address.	Maitland, FL 32751		
ARTICL			
The name	e and address of the Incorporator is:		
Name:	Eric Philcox		
Address:	555 Winderley Place Suite 300		
	Maitland, FL 32751		
******	******************************	************	
	een named as registered agent to accept service of pro icate, I am familiar with and accept the appointment of		esignated ir
	Culley	02/04/2019	
	Required Signature/Registered Agent	Date	
	this document and affirm that the facts stated herein to the Department of State constitutes a third degree		bmitted in a
	Enfly	02/04/2019	
	Required Signature/Incorporator	Date	

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