## P19000222892

(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:					

M19000013731

Office Use Only

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February 12, 2019

IZI PINHO PINHO LAW, PLLC 6965 PIAZZA GRANDE AVE ORLANDO, FL 32835

SUBJECT: SEIZPAR AMERICA, LLC

Ref. Number: W19000013731

We have received your document for SEIZPAR AMERICA, LLC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

The Certificate of Conversion must be signed by an authorized person.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 419A00002974

www.sunbiz.org

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## **COVER LETTER**

TO:	Charter Section Division of Corporations				
SUBJ	IECT: Seizpar America, Corp				
., 0		of Resulting Flo	orida Profit	Corporation	
	nclosed Certificate of Conversion, Artic				i "Other Business
Please	e return all correspondence concerning	this matter to:			
īzi Pir	nho				
	Contact Person				
Pinho	Law, PLLC				
	Firm/Company				
6965	Piazza Grande Ave				
	Address	<u> </u>			
Orlan	do, FL, 32835				
	City, State and Zip C	ode			
izi@p	pinholaw.com				
	E-mail address: (to be used for future a	nnual report not	ification)		
For fu	urther information concerning this matte	er, please call:			
Izi Pir	nho	at (	209-8	282	
	Name of Contact Person		ea Code and	l Daytime Telephone Number	
Enclo	sed is a check for the following amount	::			
<b>□</b> \$10	95.00 Filing Fees S\$113.75 Filing Fee and Certificate of Status	es ☐\$113.75 I and Certifie	Filing Fees ed Copy	☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
New I Divisi Clifto	EET ADDRESS: Filings Section ion of Corporations n Building Executive Center Circle		New F Division P. O. E	ING ADDRESS: filings 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 <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" introductely prior to the filing of this Certificate of Conversion is:
Scizpar America, LLC - LIX601262901
Enter Name of Other Business Entity
2. The "Other Business Entity" is a Limited Liability Company
(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)
11/09/2018 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:
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
Seizpar America, Corp
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date:  Date of Filing
(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florid 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 this 21 day of January	. 20						
Required Signature for Florida Profit Corporation:							
Signature of Chairman, Vice Chairman, Director, Office Incorporator: Izi Pinho Printed Name: Izi Pinho Title: Incorpo	er, or, if Directors or Officers have not been selected, an						
Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]							
Signature:							
Printed Name: TZT PINHO	_ Title: _incorporato [						
Signature:	·						
Printed Name: MILTON INSUELA PEREIRA JA	L Title: HEHBOR						
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: 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 I NAME Seizpar America, Corp				
The name of the corporation shall be: Seizpar America, Corp				
ARTICLE II PRINCIPAL OFFICE				
The principal place of business/mailing address is:				
Principal street address	Mailing address, if different is: 6965 Piazza Grande Ave.  Suite 107, room 13			
1596 MAIDSTONE CT.				
Davenport, FL 33896	Orlando, FL 32835			
ARTICLE III PURPOSE				
The purpose for which the corporation is organized is:				
Any and all lawful business				
		911		
	78	SE 150		
		55		
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	<del>'</del>			
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	·	<u>က</u>		
ARTICLE IV SHARES 10,000				
The number of shares of stock is:				
ARTICLE V INITIAL OFFICERS AND/OR DIR	ECTORS			
Name and Title:	Name and Title:			
Address:	Address:			
Name and Title:	Numa and Title			
Name and Title:	Name and Title:			
Address:	Address:			
		·		
Name and Title:	Name and Title:			
Address:	A.11			
	Address:			

	LE VI REGISTERED AGENT e and Florida street address (P.O. Box NOT accepta	ble) of the registered agent is:	
Name;	Pinho Law, PLLC	. •	
Address:	6965 Piazza Grande Ave. Suite 203		
	Orlando, F1, 32835		
ARTICI			
The <u>name</u>	e and address of the Incorporator is:		
Name:	Izi Pinho		
Address:	6965 Piazza Grande Ave. Suite 203		
	Orlando, FL 32835		
****			
Having b	een named as registered agent to accept service of pi licate. I am familiar with and accept the appointment	ocess for the above stated corporation at the plac as registered agent and agree to act in this capac	ce designated in ity
Uo	Moma C. Fernandus Required Signature/Registered Agent	01/21/2019	
V	Required Signature/Registered Agent	Date	
I submit i document	this document and affirm that the facts stated herein t to the Department of State constitutes a third degree	are true. I am aware that any false information felony as provided for in s.817.155, F.S.	ı submitted in a
	Myliti	01/21/2019	
	Required Signature/Incorporator	Date	