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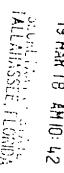
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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Special Instructions to	Filing Officer	
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COVER LETTER

TO: Charter Section Division of Corporations

Tallahassee, FL 32301

SUBJECT: NOELIA Q	UINONEZ PA			
		Resulting Florida	Profit	Corporation
	e of Conversion, Article Profit Corporation" in ac			ees are submitted to convert an "Other Business 15, F.S.
Please return all corresp	pondence concerning thi	s matter to:		
CARLOS APONTE				
	Contact Person			
APONTE PAEZ ACCOL	JNTANTS LLC			
	Firm/Company			
1395 BRICKELL AVEN	UE SUITE 900			
	Address			
MIAMI, FL 33131				
	City, State and Zip Cod	e		
_	EZACCOUNTANTS.COM			
E-mail address: (t	o be used for future annu	ual report notificat	ion)	
For further information	concerning this matter,	•		
CARLOS APONTE		_at (794-6	182
Name of Co	ontact Person	Area Co	de and	Daytime Telephone Number
Enclosed is a check for	the following amount:			
■ \$105.00 Filing Fees	■\$113.75 Filing Fees and Certificate of Status			□\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: New Filings Section Division of Corporation Clifton Building 2661 Executive Center			New F Divisio P. O. E	ING ADDRESS: illings Section on of Corporations Box 6327 assee, FL 32314

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:
NOELIA QUINONEZ REALTY LLC	
Enter Name of Other Busin	ness Entity
2. The "Other Business Entity" is a LLC	
(Enter entity type. Example: limited liability general partnership, common law or business	
first organized, formed or incorporated under the laws ofFLORIDA	
(Enter state, or if a non-U.S. entity, the	e name of the country)
on	
Enter date "Other Business Entity" was first org	anized, formed or incorporated
3. If the jurisdiction of the "Other Business Entity" was changed, the organized, formed or incorporated:	<u> </u>
4. The name of the Florida Profit Corporation as set forth in the attac	thed Articles of Incorporation:
NOELIA QUINONEZ PA	
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 aft Department of State.) Note: If the date inserted in this block does not meet the applicable so listed as the document's effective date on the Department of State's re-	ter the date this document is filed by the Florida tatutory filing requirements, this date will not be
Page 1 of 2	<u></u>

Signed thisday	of MARCH	, 20	
Required Signature for Flo	orida Profit Corporation	<u>ı:</u>	
Signature of Chairman, Vice Incorporator:		DENT	not been selected, an
		Entity: [See below for required sign	
Signature:NOELIA QUII	ONEZ	PRESIDENTTitle:	
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Printed Name:		Title:	<u>. </u>
If Florida General Partner Signature of one General Pa		y Partnership:	
If Florida Limited Partner Signatures of <u>ALL</u> General		y Limited Partnership:	

If Florida Limited Liability Company:
Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:

\$35.00

Fees for Florida Articles of Incorporation:

\$70.00

Certified Copy:

\$8.75 (Optional)

Certificate of Status:

\$8.75 (Optional)

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

The principal place of business/mailing address is:		
	N.C. 11	
Principal street address 135 CALAIS DR	Mailing add	ress, if different is:
APT 17		
ЛІАМІ BEACH, FL 33141		
ARTICLE III PURPOSE		
he purpose for which the corporation is organized	d is:	
REAL ESTATE AGENT		
· · · · · · · · · · · · · · · · · · ·		
the number of shares of stock is:	R DIRECTORS	
he number of shares of stock is:		
he number of shares of stock is: 100 INTICLE V INITIAL OFFICERS AND/O Iame and Title: NOELIA QUINONEZ	R DIRECTORS Name and Title:	
the number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/O Jame and Title: NOELIA QUINONEZ 2135 CALAIS DR APT 17	Name and Title:	······································
The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/O Jame and Title: NOELIA QUINONEZ Address: 2135 CALAIS DR APT 17	Name and Title:	
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the number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/ORDINATE NOELIA QUINONEZ 2135 CALAIS DR APT 17 MIAMI BEACH, FL 33141 Mame and Title: Address:	Name and Title: Address: Name and Title: Address:	19 HAR 18 AH I

ARTICL	E VI REGISTERED AGENT	
The name	e and Florida street address (P.O. Box NO	OT acceptable) of the registered agent is:
Name:	NOELIA QUINONEZ	_
Address:	2135 CALAIS DR APT 17	
	MIAMI BEACH, FL 33141	
ARTICL		
The name	e and address of the Incorporator is:	
Name:	NOELIA QUINONEZ	
Address:	2135 CALAIS DR APT 17	
	MIAMI BEACH, FL 33141	
******	********	*******
• • •		ervice of process for the above stated corporation at the place designated in pointment as registered agent and agree to act in this capacity
		3/14/19
	Required Stanature/Registered Agent	Date
		ited herein are true. I am aware that any false information submitted in a
document	to the Department of State constitutes a ti	hird degree felony as provided for in s.817.155, F.S.
		3/14/19.
	Required Signature/Incorporator	Date

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