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SUBJECT	r:	\mathcal{M}	33	Income	2 7	ax	Inc		
	·	•	Name of	Resulting Florida		Corporat	ion		
				s of Incorporation coordance with s.			ibmitted to co	onvert an "Oth	er Business
Please retu	ırn all corresp	ondence co	ncerning thi	s matter to:					
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For further	information	concerning	this matter,	please call:					
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Enclosed is	s a check for	the following	ng amount:						
X \$105.00	Filing Fees	□\$113.75 and Certifi Status	Filing Fees cate of	☐\$113.75 Filing and Certified Co		Certifie	.50 Filing Fe ed Copy, and ate of Status	es.	
New Filing Division of Clifton Bu	f Corporation				New F Division P. O. B	ilings Se	porations		

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" immediately prior to the filing of this Certificate of Conversion is:
M 3B Income Tax LLC # L13-203
Enter Name of Other Business Entity
2. The "Other Business Entity" is a
tirst organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country)
on FEb 08 2013 Enter date "Other Business Entity" was first organized, formed or incorporated
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:
M3B Income Tax 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

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Signed this 4th day of Nay	20
Required Signature for Florida Profit Corporation:	
Signature of Chairman, Vice Chairman, Director, Office Incorporator: Printed Name: Martin Ame Stitle:	President
Required Signature(s) on behalf of Other Business 1	
Signature: Martin Aul	<u> </u>
Printed Name: Maitin Auros	_Title:_ AMBT
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	•
Printed Name:	
If Florida General Partnership or Limited Liability Signature of one General Partner.	Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	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: 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)

200

ARTICLE I NAME The name of the corporation shall be:	B FACOME TOX FAC
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
131 E. New York Aue	
Svile 218 Deland, FL	/
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
Changed from LC	to 5-corp
	-
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIR	
	Name and Title:
	Address:
Deituna, FL 32738	
Name and Title:	
Address:	Address:
Name and Title:	Name and Title:
Address:	

The name and Florida street address (P.O. Box NOT acceptable) of the re-	egistered agent is:
Name: Moutin Aules	
Address: 3213 Cranston St.	
Deitung, FL 32738	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Name: Martin Aules	
Address: 3913 Cranston St.	•
Deitona, Fi 32738	

Required Signature/Registered Agent	<u>05/09/19</u> Date
I submit this document and affirm that the facts stated herein are true. I document to the Department of State constitutes a third degree felony as p	
Monters Acides	05/09/19
Required Signature/Incorporator	Date