P19000058449

(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Continue Continue of Change				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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SECRETARY OF STATE

N CULLIGAN JUL 3 0 2019

COVER LETTER

TO: Charter Section Division of Corporations	,		
SUBJECT: Shant ega	= Property	Solutions	Inc.
	Name of Resulting Florid	a Profit Corporation	
The enclosed Certificate of Conver Entity" into a "Florida Profit Corpo			convert an "Other Business
Please return all correspondence co	oncerning this matter to:		
Koren St	1 1ank		
Contac	rt Person	_	
Slicentege Dropert	ompany	Inc	
166 Green F	Edm Court		
Ad	dress	_	
St. Ay us Ane City. State	FL 370	186	
Shantaga	@ rock	elmail.	COM
E-mail address: (to be used for	or future annual report notific	ation)	
For further information concerning	this matter, please call:		
Karen Shank	at (<u><7/</u>	1632 5111	,
Name of Contact Perso	n Area C	lode and Daytime Telephone	Number
Enclosed is a check for the following	ng amount:		
□ \$105.00 Filing Fees □\$113.75 and Certifi Status		_	d
STREET ADDRESS: New Filings Section		MAILING ADDRESS: New Filings Section	

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

_ : h

July 10, 2019

KAREN SHANK 166 GREEN PALM COURT ST. AUGUSTINE, FL 32086

SUBJECT: SHANTEGA PROPERTY SOLUTIONS, INC.

Ref. Number: W19000063166

We have received your document for SHANTEGA PROPERTY SOLUTIONS, INC. and your check(s) totaling \$122.50. However, the document has not been filed and is being retained in this office for the following:

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.

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

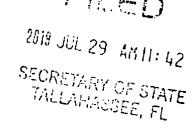
If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 319A00013934

Neysa Culligan Regulatory Specialist II

www.sunbiz.org

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:

Shartega Creferty Salutions, Inc. Enter Name of Other Business Entity
Enter Name of Other Business Entity
2. The "Other Business Entity" is a
(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 Mevada (Enter state, or if a non-U.S. entity, the name of the country)
5-16-12
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 <u>attached Articles of Incorporation:</u> Shantega Property Salutions, Inc. Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: 7 - 3 / - / 9. (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.)

Signed	this day of	
	/ ed Signature for Florida Profit Corporation:	
	i	er, or, if Directors or Officers have not been selected, an
<u>Requir</u>	ed Signature(s) on behalf of Other Business I	Entity: [See below for required signature(s).]
Signatu	re: Kare Space	
Printed	re: Karen Shank	_ Title:Director
Signatu	re:	
	Name:	
Signatu	re:	
Printed	Name:	Title:
Signatu	re:	
Printed	Name:	Title:
Signatu	re;	
Printed	Name:	Title:
Signatu	re:	
Printed	Name:	Title:
Signatu f Flori	da General Partnership or Limited Liability re of one General Partner. da Limited Partnership or Limited Liability res of ALL General Partners.	
<u>f Flori</u>	da Limited Liability Company: re of a Member or Authorized Representative.	
All oth e Signatu	ers: re 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 The name of the corporation shall be: Shantega Property Solutions, Inc	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address 166 Green Polini Court Mailing address, if different is:	
St Augustine II	•
37086 PF 29	•
ARTICLE III PURPOSE The purpose for which the corporation is organized is: The currence of the corporation is to rease in a FR. 5.	
The surgese of the corporation is to engage in a significant to the surgestion is to engage in a significant to the surgestion of the surgestion has a corporation have be organized under the seneral corporation have of Florida other than the banking business, the trust	
be organized under the General Corporation Law of	
Florida other than the banking business, the trust	
company business or the practice of a profession permitted & be incorporated by the Florida	
Corporations Code.	
ARTICLE IV SHARES The number of shares of stock is: 75, 000	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
Name and Title: Mary Glicabeth Criega, President Name and Title: Mary Elizabeth Ortega, Treasure	"
Address: 166 Green Palm Ct Address: 166 Green Palm Ct	
St. Fugustine FL 32086 St. Fugustine FL 32086	
Name and Title: Karen Shark Servetory Name and Title: Karen Shark, Director	
Address: 166 Green Polm Ct. Address: 166 Green Polm Ct.	
St Augustine FL32086 St. Augustine FL32086	>
Name and Title: Name and Title:	
Address: Address:	

ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT accepta	ble) of the registered agent is:
Name: Karen Shank Address: 166 Green Palm Ct St Augustine Ft 32086	
Address: 166 Green Falm Ct	
St Augustine FL32086	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Name: Karen Shank Address: 66 Green Falm Ct. St Augustine FL 32086	
Address: 66 Green Falm Ct.	
St Augustine FL 32086	
****************************	*****
Having been named as registered agent to accept service of protein this certificate, I am familiar with and accept the appointment	rocess for the above stated corporation at the place designated in as registered agent and agree to act in this capacity
Kan hall	7/8/19
Required Signature/Registered Agent	Date
	are true. I am aware that any false information submitted in a
document to the Department of State constitutes a third degree	
Kau Thank	7/8/19
Required Signature/Incorporator	Date

2019 JUL 29 AMIII: 42 SECRETARY OF STATE TALLAHASSEE, FL