919000059232

(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:			

Office Use Only



900331623499

07/08/19--01004--011 **111.70

2019 AUG ~2 PH 3:51

N. SAMS



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 22, 2019

BARBARA PADRON 15715 S. DIXIE HWY STE #403 PALMETTO BAY, FL 33157 US

SUBJECT: MOVING TOWARD AGAPE

Ref. Number: W19000066650

We have received your document for MOVING TOWARD AGAPE and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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.

2015 777 - 2 PH 1: 43

Nadira D McClees-Sams Regulatory Specialist II

Letter Number: 319A00014830

www.sunbiz.org

COVER LETTER

Tallahassee, FL 32301

Charter Section

TO:

Division of Co	-				
SUBJECT: Moving Tox	ward Agape				
30 b3 EC1	Name of	Resulting	Florida Profit	Corporation	
	e of Conversion, Article Profit Corporation" in ac	•		ces are submitted to convert a	in "Other Business
Please return all corresp	oondence concerning this	s matter to:	:		
Barbara Padron					
	Contact Person				
		·			
	Firm/Company				
15715 S. Dixie Hwy Ste	#403				
	Address				
Palmetto Bay, FL 33157					
	City, State and Zip Code	c			
movingtowardagape@gn	nail.com				
E-mail address: (t	o be used for future annu	ual report n	otification)		
For further information	concerning this matter,	please call:			
Barbara Padron		at (305	281-49	954	
Name of Co	ontact Person		Area Code and	l Daytime Telephone Numbe	r
Enclosed is a check for	the following amount:				
□ \$105.00 Filing Fees	■\$113.75 Filing Fees and Certificate of Status		5 Filing Fees fied Copy	☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS:				ING ADDRESS:	
New Filings Section Division of Corporation	ne			ilings Section on of Corporations	
Clifton Building	เอ			Box 6327	
2661 Executive Center	Circle			1000 FI 30314	

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:
Moving Toward Agape, LLC
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 Florida
(Enter state, or if a non-U.S. entity, the name of the country) on 07/13/2017
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 no organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
Moving Toward Agape
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 Flori-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 thisday of	, 20 19	
Required Signature for Florida Profit Corporation		
Signature of Chairman, Vice Chairman, Director, Off Incorporator: Printed Name: Barbara Padron Title: Owne		en selected, an
Required Signature(s) on behalf of Other Business	s Entity: See below for required signature	(s).]
Signature: Barbara Padron		-
Printed Name: Barbara Padron	Title: Owner	_
Signature:		_
Printed Name:	Title:	_
Signature:		_
Printed Name:	Title;	_
Signature:		_
Printed Name:	Title:	_
Signature:		_
Printed Name:	Title:	_
Signature:		_
Printed Name:	Title:	_
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:	MINAUG 32 PH
If Florida Limited Partnership or Limited Liabilit	y Limited Partnership:	AUG 32
Signatures of <u>ALL</u> General Partners.		SKE T
If Florida Limited Liability Company: Signature of a Member or Authorized Representative		FILED SECRELARY OF THE STATE ALL ARIASSEE FROM THE STATE ARIASSE
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)	

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	Moving Towa	rd Agape	Inc.
	(PROPOSE D CORPORA	ATE NAME - <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	d a check for:
☐ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	
FROM:	Barbara F		Clark V A 3
	12/10/2	Dixie Hwy Address	JK# 705
	Palmetto Bay	FC 3315	7
	(707) 2.81 - Daytime T	- 495-L ₁ Celephone number	
	Movi 14to wavlaga p E-mail address: (to be use	e @ grugil. www. d for future annual report i	notification)

NOTE: Please provide the original and one copy of the articles.

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

ICLE I NAM name of the corpo	ration shall be: Moving		
	VCIPAL OFFICE Principal street address	~	address, if different is:
715 5.1	Dixie Huy Sc#403		
the Ho T	Say, Fc. 33157		
ICLE III PURI	POSE n the corporation is organized is:	o possicle montil	how Her service
	p practice.		
<u> </u>	,		
ICLE IV SHAL	RES of stock is: /CO		
number of shares of	of stock is: /CO ,	Sarbayo Pagaron	20 7 A
ICLE V INIT	of stock is: /CO , IAL OFFICERS AND/OR DIRECTO	Sarbaya Pagaon	2019 AUG
number of shares of shares of the share and Tite of the share and Tite of the share and Tite of the share of	of stock is: /CO IAL OFFICERS AND/OR DIRECTO tte: fresiclent	Sarbayand Para Cyon y tethyddress:	20.19 AUG 32 SECRETARIASSE
number of shares of shares of the share and Tite of the share and Tite of the share and Tite of the share of	of stock is: 100 IAL OFFICERS AND/OR DIRECTO THE: Fresiclest IDIS S. Dixie Hu	Sarbayand Para Cyon y tethyddress:	E PH
Name and Tit Address	of stock is: 100 IAL OFFICERS AND/OR DIRECTO THE: Fresiclest IDIS S. Dixie Hu	Sarbayand Pinderon Lety Address: L. 33157	PH 3: T
Name and Tit Address	of stock is: /CO IAL OFFICERS AND/OR DIRECTO III: Fresiclut IT) IS S. Dixic Hu Paluetto Bay, F	Sarbayer Pictor A teth Address: 1.33157 Name and Title:	PM 3: 55
Name and Titl	of stock is: /CO IAL OFFICERS AND/OR DIRECTO III: Aresidut Daluto Bay, F	Name and Title: Address:	PH 3: T
Name and Titl	of stock is: /CO IAL OFFICERS AND/OR DIRECTO III: Aresidut Day, F	Name and Title:	PM 3: 55
Name and Titl Address Address	of stock is: /CO IAL OFFICERS AND/OR DIRECTO THE: FESICLUT ID IS S. Dixie Hu Paluetto Bay, F	Sarbayer Process Address: Name and Title: Address:	PM 3: 55
Name and Titl Address Address	of stock is: /CO IAL OFFICERS AND/OR DIRECTO III: Aresidut Day, F	Name and Title: Name and Title: Name and Title:	PM 3: 55

Name and	I Title:	Name and Title:	
Address		Address:	
	REGISTERED AGENT		
The <u>name and Flo</u>	orida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	Barbana Padnon	<u></u>	
Address:	15715 S. Dixie Huy Ste	#403	
	Paketto Bay, Fl. 3	3157	
ARTICLE VII	NCORPORATOR		2011 SE SAL
The <u>name and ad</u>	dress of the Incorporator is:		
Name:	Barbara Padray		FILED BECKLIAKY OF FLO
Address:	15502 SW 142 d.	<u> </u>	Ho P III
	Myami, FL. 3317)		FILED 2019 AUG 32 PM 3: 55 SECRETARY OF FLOORS
ARTICLE VIII	EFFECTIVE DATE:		
Effective date, if c (If an effective da filing.)	other than the date of filing: tte is listed, the date must be specific and car	(OPTIONA nnot be more than five days	L) prior or 90 days after the
	inserted in this block does not meet the applical fective date on the Department of State's record		nts, this date will not be listed as
Having been nam his certificate, I a	ed as registered agent to accept service of proc m familia r wi th and accept the appointment as	ess for the above stated corporegistered agent and agree to	oration at the place designated is act in this capacity
			7/29/19
	Required Signature/Registered Agent		
submit this docu locument to the D	ment and affirm that the facts stated herein a epartment of State constitutes a third degree fe	are true. I am aware that the dony as provided for in &817.	false information submitted in a
			7/29/19
Require	ed Signature/Incorporator		Date