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(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:				
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DATE: 8/19/19

NAME: BEGENYFIELD INC.

TYPE OF FILING: CONVERSION

COST:

113.75

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL H

COVER LETTER

TO:	Charter Section Division of Co	—		
SUBJ	ECT: Begenyfiel	-		
0020			Resulting Florida Prof	t Corporation
The en	nclosed Certifica " into a "Florida	te of Conversion, Article Profit Corporation" in a	es of Incorporation, and ecordance with s. 607.1	fees are submitted to convert an "Other Business 145, F.S.
Please	return all corres	spondence concerning th	is matter to:	
Daniel	l Steigert			
		Contact Person		
IBCF,	Inc.			
		Firm/Company		
101 M	ain Street, Suite O	inc		
		Address		
Тарраг	n, NY 10983			
		City, State and Zip Cod	e	
dsteige	rt@ibcf.com			
H	E-mail address: (1	to be used for future ann	ual report notification)	
For fu	rther information	concerning this matter,	please call:	
Daniel	Steigert		at (8453980900	
	Name of Co	ontact Person	··\ /	d Daytime Telephone Number
Enclos	ed is a check for	the following amount:		
□ \$10	5.00 Filing Fees	\$113.75 Filing Fees- and Certificate of Status	#\$113.75 Filing Fees and Certified Copy	☐\$122.50 Filing Fees, Certified Copy; and Certificate of Status
New F Division	ET ADDRESS: ilings Section on of Corporation Building	18	New I Divisi	ING ADDRESS: Filings Section on of Corporations Box 6327

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:
Bengeyfield Inc.
Enter Name of Other Business Entity
2. The "Other Business Entity" is a Corporation
(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)
Maý 8, 1984
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:
Bengeyfield Inc.
Enter Name of Florida Profit Corporation
The 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 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 isted as the document's effective date on the Department of State's records.

Signed this 9th day of May	, 20
Required Signature for Florida Profit Corporation:	
Signature of Chairman, Vice Chairman, Director, Office Incorporator: Free, Mond Title: Printed Name: Vice Chairman, Director, Office Incorporator: Free Mond Title: Printed Name: Vice Chairman, Director, Office Incorporator: Free Mond Title: Printed Name: Vice Chairman, Director, Office Incorporator: Vice Chairman, Vice Chairman, Director, Office Incorporator: Vice Chairman, Vice Ch	er, or, if Directors or Officers have not been selected, an
Donainal Cinatanal A. 1 1 15 (Co.)	
Signature:	
Printed Name: Davil Steiger	Frite: Authorited forson
Signature:	
Printed Name:	
Signature:	
Printed Name:	
Signature:	
Printed Name:	
Signature:	
Printed Name:	_ Title:
Signature:	
Printed Name:	
If Florida General Partnership or Limited Liability 1 Signature of one General Partner.	Partnership:
If Florida Limited Partnership or Limited Liability I Signatures of <u>ALL</u> General Partners.	Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	
All others: Signature of an authorized person.	
Fees:	· · · · · · · · · · · · · · · · · · ·

\$8.75 (Optional) \$8.75 (Optional)

\$35.00

\$70.00

Certificate of Conversion:

Certified Copy:

Certificate of Status:

Fees for Florida Articles of Incorporation:

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: Bengeyfield Inc.			
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:			Marie .
The principal place of business/maining address is:			
Principal street address 3114 S. Ocean Blvd. Apt 410	Mailing address, if d 7491 N. Federal Hwy Ste C-5-		
Highland Beach, NJ 33487	Boca Raton, FL, 33487		
ARTICLE III PURPOSE The purpose for which the corporation is organized is:			
Providing accounts receivable and liason between vendors an	d their sales venues.		
			
			
			
ARTICLE IV SHARES The number of shares of stock is: 9500			
ARTICLE V INITIAL OFFICERS AND/OR DI		-	-
Name and Title: Fred Mandell-President	Name and Title: Arlene Krauss Mandel	l- Vice/Presic	ie nt
Address: 7491 N. Federal Hwy Ste C-5-294	Address: 7491 N. Federal Hwy s	te C-5-294	
Boca Raton, FL 33487	Boca Raton, FL 33487		
Name and Title:	Name and Title:	: *	Ç.
Address:	Address:		55
	· · · · · · · · · · · · · · · · · · ·		P (5)
Name and Title:	Name and Title:	11.	25
Address:		7	का (का

The <u>name</u>	e and Florida street address (P.O. Box NOT	acceptable) of the registered agent is:	
Name:	Paracorp Incorporated		
Address:	155 Office Plaza Drive, 1st Floor		
	Tallahassee, FL 32301		
ARTICL			
The <u>name</u>	and address of the Incorporator is:		
Name:	Daniel Steigert		
Address:	101 Main Street, Suite One		
	Таррап, NY 10983		
******** Having be this certifi	en named as registered agent to accept servi	******* e of process for the above stated corporation at the place designated to the time of the above stated corporation at the place designated to the time of the capacity.	in
	-A55.5taAl	Sec-C/a 5/9/2019	
0	Required Signature/Registered Agent	Date	
l submit th locument	his document and affirm that the facts stated to the Department of State constitutes a third	terein are true. I am aware that any false information submitted in degree felony as provided for in s.817.155, F.S.	ű
	5/2 AA	5/9/2019	
6	Required Signature/Incorporator	Date	

Date