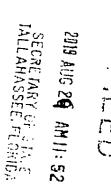
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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
. (Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

MIG www 95149

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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 14, 2019

JHON RODRIGUEZ 3095 S MILITARY TRAIL STE 4 LAKE WORTH, FL 33463

SUBJECT: ENGAGED E-COMMERCE LLC

Ref. Number: W19000075149

We have received your document for ENGAGED E-COMMERCE LLC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Remove IIc from article 1.,

Please return the corrected original and one copy of 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: 719A00016762

Tyrone Scott
Regulatory Specialist II
New Filings Section

www.sunbiz.org

COVER LETTER

'IO:	Charter Section Division of Co			•	
SUBJ	FCT: ENGAGED	E-COMMERCE INC			
0000	LC1	Name of	Resulting Florida	Profit	Corporation
The er Entity	nclosed Certificat " into a "Florida	e of Conversion, Article Profit Corporation" in ac	s of Incorporation. ecordance with s. 6	and fe	ees are submitted to convert an "Other Business 15, F.S.
Please	return all corresp	pondence concerning this	s matter to:		
JHON	RODRIGUEZ				
		Contact Person			
JIREH	MULTISERVICE	ES LLC			
		Firm/Company			
3095 \$	MILITARY TRA	IL STE 4			
		Address			
LAKE	WORTH FL 3346	53			
	<u> </u>	City, State and Zip Cod-	e		
jirehm	ulti@gmail.com				
	E-mail address: (1	to be used for future anni	ual report notificat	ion)	
For fu	rther information	concerning this matter,	please call:		
JHON	RODRIGUEZ		561 at (574 91	110
	Name of Co	ontact Person		de and	Daytime Telephone Number
Enclo	sed is a check for	the following amount:			
= \$10	95.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	☐\$113.75 Filing and Certified Co		□\$122.50 Filing Fees. Certified Copy. and Certificate of Status
New I Divisi Cliftor 2661 I	ET ADDRESS: Filings Section on of Corporation Building Executive Center cassee, FL 32301	ns Circle		New F Divisio P. O. E	ING ADDRESS: ilings Section on of Corporations Box 6327 assee, FL 32314

Certificate of Conversion For

"Other Business Entity"

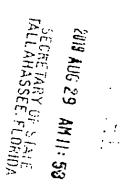
Into 🕟 🕛

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:
ENGAGED E-COMMERCE LLC - L/9 UVD 102462
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 FL
(Enter state, or if a non-U.S. entity, the name of the country)
04/12/2019 on
Enter date "Other Business Entity" was first organized, formed or incorporated
 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: The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u>:
ENGAGED E-COMMERCE 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



Signed	thisday of	, 2019
Requir	ed Signature for Florida Profit Corporation:	
Signatu Incorpo Printed	ore of Chairman, Vice Chairman, Director, Office Orator: Name: NICHOLAS D BELOTTO Title: PRESID	er, or, if Directors or Officers have not been selected, an
	ed Signature(s) on behalf of Other Business F	
Signatu	ire: 4575	
Printed	Name:	Title:
Signatu	ıre:	
	Name:	
Signatu	аге:	
Printed	Name:	Title:
Signatu	are:	
Printed	Name:	Title:
Signatu	ire:	<u> </u>
	Name:	
Signatı	nre:	
	Name:	
If Flor Signatt	ida General Partnership or Limited Liability are of one General Partner.	Partnership:
lf Flor Signatu	ida Limited Partnership or Limited Liability ares of ALL General Partners.	Limited Partnership:
<u>If Flor</u> Signatı	ida Limited Liability Company: ure of a Member or Authorized Representative.	
<u>All oth</u> Signati	ers: are 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 II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address 22100 PALM WAY 104	Mailing address, if different is:
BOCA RATON FL 33433	
APTICI E III - BUDDOCE	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: ONLINE SALES	
	TALL SEC
	SECNETAR SECNETAR LLAHASS
ARTICLE IV SHARES	m = m = m = m = m = m = m = m = m = m =
The number of shares of stock is:	Qra X
ARTICLE V INITIAL OFFICERS AND/OR DIRE	CTORS
Name and Title: NICHOLAS D BELOTTO -PRESIDENT- 22100 PALM WAY 104	Name and Title:
Address: BOCA RATON FL 33433	Address:
Name and Title: KEVIN B LABRA VILLENA -VP-	Name and Title:
Address: 12120 SUNSET POINT CIR	Name and Title: Address:
WELLINGTON FL 33414	Address:
Name and Title:	Name and Title:
Address:	Address:

	E VI REGISTERED AGENT	
The name	e and Florida street address (P.O. Box NOT a	eceptable) of the registered agent is:
Name:	JIREH MULTISERVICES LLC	
Address:	3095 S MILITARY TRAIL STE4	
	LAKE WORTH FL 33463	
ARTICL	E VII INCORPORATOR	
The name	and address of the Incorporator is:	
Name;	NICHOLAS D BELOTTO	
Address:	22100 PALM WAY 104	
	BOCA RATON FL 33433	
******** Having be this certifi	*********************************** een named as registered agent to accept servic icate, I am familiar with and accept the appoin	**************************************
	- Jûl	7/05/2019
	Required Signature/Registered Agent	Date
I submit t	his document and affirm that the facts stated	herein are true. I am aware that any false information submitted in a
document	to the Department of State constitutes a third	degree felony as provided for in s.817.155, F.S.
	3/2	7/05/2019
	Required Signature/Incorporator	Date