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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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COVER LETTER

TO:

Charter Section

Tallahassee, FL 32301

Division of Corporations	
SUBJECT: El Prino (1 Pasa de Las Name of Resultin	g Florida Profit Corporation
The enclosed Certificate of Conversion, Articles of Inco Entity" into a "Florida Profit Corporation" in accordance	orporation, and fees are submitted to convert an "Other Business e with s. 607.1115, F.S.
Please return all correspondence concerning this matter	to:
Edvardo Sveno Contact Person	
ElPrimo Lo Cosa de Los Alca Firm/Company	Abories Rest. In.
1000 W. Vine 57 Address	
1685' MMoc, Set 3474/ City. State and Zip Code	
E-mail address: (to be used for future annual repor	1 notification)
For further information concerning this matter, please ea	
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:	
	7.75 Filing Fees 7.75 Filing Fees, rtified Copy Certified Copy, and Certificate of Status
STREET ADDRESS: New Filings Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: New Filings Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Certificate of Conversion For "Qther 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:
Enter Name of Other Business Entity
Enter Name of Other Business Entity
2. The "Other Business Entity" is a
first organized, formed or incorporated under the laws of
10/22/10
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>
Thing to Case de las Alcabricas Restaunt Inc.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: <u>09/01/19</u> . (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 this Ol day of October	. 20_/9
Required Signature for Florida Profit Corporation:	
Signature of Chairman, Vice Chairman, Director, Offic Incorporator: <u>Edvardo Rocco</u> Printed Name: <u>Edvardo Born</u> Title: <u>f</u>	er, or, if Directors or Officers have not been selected, an
Required Signature(s) on behalf of Other Business I	
Signature: Carrelo Breno	
Signature: Edwardo Bueno Printed Name: Edwardo Bueno	Title: President
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 Liability Signature of one General Partner.	Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	<u>Limited Partnership:</u>
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)

ARTICLE II PRINCIPAL OFFICE			
ne principal place of business/mailing address is:			
Principal street address	Ma	lling address, if differ	ent is:
1000 W. Vine ST			
C:55: MALE FL 3474		SME	
RTICLE III PURPOSE ne purpose for which the corporation is organized is:		<u> </u>	
All De May Business Rest.			
		· · · · · · · · · · · · · · · · · · ·	
DTICLE W. CHADEC			
ARTICLE IV SHARES The number of shares of stock is:/OO	ECTORS		
he number of shares of stock is:			
ne number of shares of stock is:	Name and Title:		\$ 6.00 \$ 6.00 \$ 7.10 \$
the number of shares of stock is:	Name and Title:		28 8 OC
ne number of shares of stock is:	Name and Title:		2818 OCT - 1
he number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/OR DIR Same and Title: Edvar do Brend Pr Address: 1000 W. Vine 55 Migsimm FG, FC 3474/	Name and Title:Address:		PRID AHASSEE
ne number of shares of stock is:	Name and Title: Address: Name and Title:		THE CANASSEE
ne number of shares of stock is:	Name and Title: Address: Name and Title:		218 OCT -1 AM II: 3
The number of shares of stock is:	Name and Title: Address: Name and Title: Address:		2018 OCT - 1 AM II: 36

ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box, NOT acceptab	le) of the registered agent is:
Name: Edingde Burno	
Address: 1000 W. Vine ST	
Kissimme, Fa 3474	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Name: Editedo Breno	
Address: 1000 W. Uine ST	
1655: MMC1 jel 34741	
*************	*******
Having been named as registered agent to accept service of pro this certificate, Lam familiar with and accept the appointment a	
Lind Bu	10/01/19
Required Signature/Registered Agent	Date
I submit this document and affirm that the facts stated herein a document to the Department of State constitutes a third degree f	re true. I am aware that any false information submitted in a felony as provided for in s.817.155, F.S.
	10/1/19

Date

Required Signature/Incorporator