

P19000074179

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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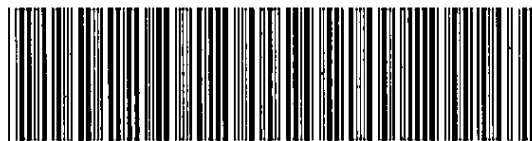
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/29/19--01023--003 **113.75

FILED
2019 SEP 20 AM 9:57
SECRETARY OF STATE
TALLAHASSEE, FL



September 19, 2019

Direct dial: 954-627-3838
Email: mmm@trippscott.com

VIA FEDERAL EXPRESS

Florida Department of State
Division of Corporations
New Filing Section
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation for SmarterVitamins Corp., a Michigan corporation

Dear Sir or Madam:

Enclosed please find a Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation for the above referenced entity together with the firm's check in the amount of \$113.75 representing the filing fee for the Certificate of Conversion as well as the fees for the filing and certified copy of the Articles of Incorporation.

If you have any questions with regard to the Certificates of Conversion or the Articles of Incorporation, please contact me at the above telephone number or email address. I am also enclosing a Federal Express envelope for the return of the certified copies of the above filings.

Very truly yours,

Michele M. Mueller
Paralegal

mmm
Enclosures

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:
SMARTERVITAMINS CORP.

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 MICHIGAN
(Enter state, or if a non-U.S. entity, the name of the country)

on JULY 26, 2016

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:
SMARTERVITAMINS CORP.

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.

Signed this 17 day of SEPTEMBER, 2019.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: [Signature]

Printed Name: RANDY JABERO Title: PRESIDENT

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: [Signature]

Printed Name: RANDY JABERO 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 Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$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: SMARTERVITAMINS CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address
5508 BROKEN SOUND BLVD NW

APT 6201

BOCA RATON FL 33487

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY OR ALL LAWFULL BUSINESS FOR WHICH CORPORATION MAY BE INCORPORATED UNDER THE
FLORIDA BUSINESS CORPORATION ACT.

ARTICLE IV SHARES

The number of shares of stock is: 60,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: RANDY JABERO, DIRECTOR

Address: 5508 Broken Sound Blvd NW, Apt 6201
BOCA RATON FL 33487

Name and Title: RANDY JABERO, SECRETARY

Address: 5508 Broken Sound Blvd NW, Apt 6201
BOCA RATON FL 33487

Name and Title: _____

Address: _____

Name and Title: RANDY JABERO, PRESIDENT

Address: 5508 Broken Sound Blvd NW, Apt 6201
BOCA RATON FL 33487

Name and Title: RANDY JABERO, TREASURER

Address: 5508 Broken Sound Blvd NW, Apt 6201
BOCA RATON FL 33487

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Eli D. Gordon, Esq., c/o Tripp Scott, PA

Address: 110 SE 6th Street, 15th Floor

Fort Lauderdale, FL 33301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Eli D. Gordon, Esq., c/o Tripp Scott, PA

Address: 110 SE 6th Street, 15th Floor

Fort Lauderdale, FL 33301

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Eli Gordon

Required Signature/Registered Agent

9/18/2019

Date

I submit this 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.

Eli Gordon

Required Signature/Incorporator

9/18/2019

Date