

P190000080230

(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

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OCT 28 2019



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FILED
2019 OCT 25 AM 11:00
SECRETARY OF
TREASURY



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 15, 2019

DIVYA VARGHESE
102 ASTRA WAY
SAINT JOHNS, FL 32259 US

SUBJECT: BRITTSOL INC
Ref. Number: W19000091367

We have received your document for BRITTSOL INC 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 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.

Nadira D McClees-Sams
Regulatory Specialist II

Letter Number: 919A00021200

2019 OCT 25 AM 11:00

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COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: BRITTSOL INC
Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

DIVYA VARGHESE
Contact Person

Firm/Company

102 ASTRA WAY
Address

SAINT JOHNS FLORIDA 32259
City, State and Zip Code

AJITHLEAPEN@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

AJITH LEAPEN at (732) 284-4032
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$105.00 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

STREET ADDRESS:
New Filings Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
New Filings Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FILED
2019 OCT 25 AM 11:00
TALLAHASSEE, FL
SECRETARY OF STATE

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:

BRITTSOL 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 01/06/2014

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**:

BRITTSOL INC

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: 09/20/2019

(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.

FILED
2019 OCT 25 AM 11:00
STATE OF FLORIDA
TALLAHASSEE, FL 32311

Signed this 20TH 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: DIVYA VARGHESE

Printed Name: DIVYA VARGHESE Title: PRESIDENT

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

Signature: *Divya Varghese*

Printed Name: DIVYA VARGHESE 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)

FILED
2019 OCT 25 AM 11:00
STATE OF FLORIDA
CLERK OF SUPERIOR COURT

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: BRITTSOL INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

102 ASTRA WAY

SAINT JOHNS

FLORIDA 32259

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUISINESS

2019 OCT 25 AM 11:00
FILED
CLERK OF CIRCUIT COURT
JANUARY 11

FILED

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DIVYA VARGHESE PRESIDENT

Name and Title: _____

Address: 102 ASTRA WAY

Address: _____

SAINT JOHNS FLORIDA 32259

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: DIVYA VARGHESE
Address: 102 ASTRA WAY
SAINT JOHNS FLORIDA 32259

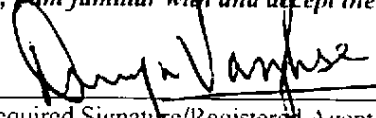
ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: DIVYA VARGHESE
Address: 102 ASTRA WAY
SAINT JOHNS FLORIDA 32259

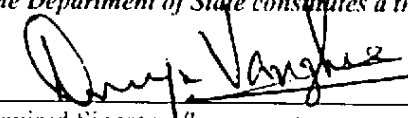
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2019 OCT 25 AM 11:00
CLERK OF COURT
JAIL AHAASSTH

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


Required Signature/Registered Agent

09/20/2019
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.


Required Signature/Incorporator

09/20/2019
Date