

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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| |
| Office Use Only |

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COVER LETTER

| TO: | Charter Section |
|------|--|
| | Division of Corporations |
| SUBJ | ECT:Conversion of LLC to C-Corp |
| | 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:

Giulia Porto

Contact Person

Drummond Advisors

Firm/Company

601 Brickell Key Drive, Suite 901

Address

Miami, FL 33131

City, State and Zip Code

gporto@drummondadvisors.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Giulia Porto

_at (<u>781</u>)7700005*38 Area Code and Daytime Telephone Number Name of Contact Person

Enclosed is a check for the following amount:

| 🔳 \$105.00 Filing Fees | □\$113.75 Filing Fees | 🗇\$113.75 Filing Fees | □\$122.50 Filing Fees. |
|------------------------|-----------------------|-----------------------|------------------------|
| | and Certificate of | and Certified Copy | Certified Copy, and |
| | Status | | Certificate of Status |

STREET ADDRESS:

New Filings Section Division of Corporations Clitton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

<u>Certificate of Conversion</u> For <u>"Other Business Entity"</u> 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:

| Allset International LLC (LIS - KISEG) |
|--|
| Enter Name of Other Business Entity |
| 2. The "Other Business Entity" is a |
| (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) |
| november 19, 2015 |
| 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: |
| <u></u> |
| 4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation: |
| Allset International 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.)

<u>Note:</u> 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



| If Florida Limited Liability Company: Signature of a Member or Authorized Representative. All others: Signature of an authorized person. | Signed this 07 day of October | . 20 |
|--|---|---|
| Incorporator: <u>Marcis [. Quaus</u> <u>Marcis Kowalski Vianna</u> Printed Name: <u>Marcis Kowalski Vianna</u> <u>Title: Manager</u> Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).] Signature: <u>Marcis A. Quaus</u> Printed Name: <u>Marcis Kowalski Vianna</u> <u>Title: Manager</u> Printed Name: <u>Marcis A. Quaus</u> Printed Name: <u>Title: Manager</u> Printed Name: <u>Title: </u> Signature: <u>Marcis Kowalski Vianna</u> Printed Name: <u>Title: </u> Signature: <u>Printed Name</u> ; <u>Title: </u> Printed Name: <u>Title: </u> Signature: <u>Printed Name</u> ; <u>Title: </u> Printed Name: <u>Title: </u> Printed Name: <u>Title: </u> Signature: <u>Printed Name</u> ; <u>Title: </u> Signature: <u>Title: </u> Printed Name: <u>Title: </u> Signature: <u>Title: </u> Signature: <u>Title: </u> Printed Name: <u>Title: </u> Signature: <u>Title: </u> Signature: <u>Title: </u> Printed Name: <u>Title: </u> Signature: <u>Title: </u> Signature: <u>Title: </u> Printed Name: <u>Title: </u> Signature: <u>Title: </u> Signature: <u>Title: </u> Signature: <u>Title: </u> Printed Name: <u>Title: </u> Signature: <u>Signature: </u> Printed Name: <u>Signature: Signature: Signature: Signature: Signature: Signature: <u>Signature: Signature: Signature: Signature: Signature: Signature: <u>Signature: Signature: Signature: Signature: Signature: Signature: Signature: Signature: <u>Signature: Signature: Signature: Signature: Signature: Signature: Signature: Signature: <u>Signature: Signature: Signature: Signature: Signature: Signature: Signature: <u>Signature: Signature: Signature: Signature: Signature: Signature: Signature: Signature: Signature: <u>Signature: Signature: Signat</u></u></u></u></u></u></u> | Required Signature for Florida Profit Corporation | <u>:</u> |
| Signature: Manuely Diame Printed Name: Manager Signature: Title: Signature: Title: Printed Name: Title: Signature: Title: Signature: Title: Signature: Signature: Printed Name: Title: Signature: Signature: Printed Name: Title: Signature: Signature: Signature: Signature: Signature of | Signature of Chairman, Vice Chairman, Director, Offi Incorporator: Marine Mar Printed Name: Marcio Kowalski Vianna Title: Manag | cer, or, if Directors or Officers have not been selected <u>cio Kowalski Vianna</u> ter |
| Signature: | | |
| Signature: | Signature: Main J. Dianne | |
| Signature: | Printed Name: | Title: |
| Signature: | | |
| Printed Name: | Printed Name: | Title: |
| Signature: | Signature: | |
| Printed Name: | Printed Name: | Title: |
| Signature: | Signature: | |
| Printed Name: | Printed Name: | Title: |
| Signature: | 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 Fase for Florida Articles of Incorporation: \$35.00 | 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 Frees: Signature of Lingerpartners | Signature: | |
| 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: S35.00 S70.00 | Printed Name: | Title: |
| 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 Event for Florida Articles of Incorporation: | | <u>Partnership:</u> |
| 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 Event for Elorida Articles of Incorporation: \$20.00 | Signature of one General Partner. | |
| Signature of a Member or Authorized Representative. All others: Signature of an authorized person. Fees: Certificate of Conversion: \$35.00 Fees: Certificate of Conversion: \$35.00 | If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners. | <u>Elimited Partnership:</u> |
| All others: Signature of an authorized person. Fees: Certificate of Conversion: \$35.00 Eess for Elorida Articles of Incorporation: \$70.00 | If Florida Limited Liability Company: | |
| All others: Signature of an authorized person. Image: Conversion: | - | |
| 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) | <u>All others:</u> Signature of an authorized person. | <u>-</u> - |
| Certificate of Conversion:\$35.00Fees for Florida Articles of Incorporation:\$70.00Certified Copy:\$8.75 (Optional)Certificate of Status:\$8.75 (Optional) | Fees: | |
| Certificate of Status:\$8.75 (Optional)Status:\$8.75 (Optional) | | \$35.00 |
| Certificate of Status: \$8.75 (Optional) | • | \$8.75 (Optional) |
| | Certificate of Status: | \$8.75 (Optional) |

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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:_____

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Principal street address 1200 Brickell Ave, Suite 1950, Miami, FL 33131

Mailing address, if different is: 6301 Collins Ave, Apt 2705.

Miami Beach, FL 33141

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful activities to which the Shareholders agree

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

| Name and T | itle: | Name and Title: | | | |
|------------|--------------------------------|-----------------|-------|-------------|---|
| Address: | 6301 Collins Avenue, apt 2705, | Address: | · · · | :3 | • |
| | Miami Beach, FL 33141 | | • | 001 | |
| Name and T | `itle: | Name and Title: | , | 23 | |
| Address: | | Address: | - | L H S | 4 |
| | | | | 32 | |
| Name and T | `itle: | 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: | Marcio Kowalski Vianna |
|----------|--------------------------------|
| Address: | 6301 Collins Avenue, apt 2705, |
| | Miami Beach, FL 33141 |

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

| | Marcio Kowalski Vianna | |
|-------|------------------------|--|
| Name: | | |

6301 Collins Avenue, apt 2705, Address:

Miami Beach, FL 33141

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

Main & Qianne_ Required Signature/Registered Agent

10/07/2019 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.

Man J. Qraune _____ Required Signature/Incorporator

10/07/2019

Date

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