P19000086769

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



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2019 OCT 28 AH 4: 17 SECRE WAY OF STATE

J. FASON NOV 2 2 2019 Alfredo Barreiro 9201 East Calusa club Drive Miami, FL 33186

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

10/21/2019

To whom it may concern:

Attached we are sending documentation pertaining to the change from a LLC to corporation regarding Blacksmith and Brigantine.

Our return address will be:

Antn: Juan Antonio Quintero 1110 Brickell Ave. Suite 430K

Miami, Fl 33131

For any Questions please call:

Alfredo Barreiro (305) 546-4473

Thank you very much for your services

Sincerely,

Alfredo Barreiro

COVER LETTER

TO:

Charter Section

| Division of Corporations | | |
|--|--|----------------------------|
| SUBJECT: Blacksmith and Brigantine Cor | rporation | |
| | ame of Resulting Florida Profit Corporation | |
| The enclosed Certificate of Conversion, Entity" into a "Florida Profit Corporatio | Articles of Incorporation, and fees are submitted to n" in accordance with s. 607.1115, F.S. | convert an "Other Business |
| Please return all correspondence concert | oing this matter to: | |
| Juan Antonio Quintero | | |
| Contact Per | son | |
| Blacksmith and Brigantine Corporation | | |
| Firm/Compa | any | |
| 1110 Brickell Ave Suite 430 | | |
| Address | | |
| Miami, Florida 33186 | | |
| City, State and Z | Lip Code | |
| juan.quintero@grupoherrerobrigantina.com | | |
| E-mail address: (to be used for futu | ure annual report notification) | |
| For further information concerning this | matter, please call: | |
| Juan Antonio Quintero | at () 4791066 | |
| Name of Contact Person | Area Code and Daytime Telephor | ne Number |
| Enclosed is a check for the following am | nount: | |
| □ \$105.00 Filing Fees ■\$113.75 Filing and Certificate of Status | | nd |
| 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 | |

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.

| Dusiness Entity Into a Florida Florid | Corporation in accordance with 3. 007.1115, 1 fortua statutes. |
|---|--|
| 1. The name of the "Other Business Ent | ity" immediately prior to the filing of this Certificate of Conversion is: |
| Blacksmith & Brigantine Company LLC | |
| | Enter Name of Other Business Entity |
| Lim 2. The "Other Business Entity" is a! | ited Liability Company |
| (Enter entity type | Example: limited liability company, limited partnership, hip, common law or business trust, etc.) |
| first organized, formed or incorporated | inder the laws of |
| (Enter sta | ate, or if a non-U.S. entity, the name of the country) |
| 04/14/2019 on | |
| | Business Entity" was first organized, formed or incorporated |
| 3. If the jurisdiction of the "Other Busin organized, formed or incorporated: | ness Entity" was changed, the state or country under the laws of which it is now |
| Florida | · |
| 4. The name of the Florida Profit Corpo Blacksmith and Brigantine Corporation | eration as set forth in the attached Articles of Incorporation: |
| · · · · · · · · · · · · · · · · · · · | Enter Name of Florida Profit Corporation |
| 5. If not effective on the date of filing, of (The effective date: Cannot be prior to Department of State.) | enter the effective date: 10/21/2019 |
| | loes not meet the applicable statutory filing requirements, this date will not be n the Department of State's records. |

Page 1 of 2

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SECRETIVEY OF STATE
TALLAHAS SEE, FI

| Signed this | 19 October day of | | , 20 ¹⁹ | |
|-------------------------|--|-----------------------|--|----------------|
| | Signature for Florida Profit | | | |
| | | | | |
| | N | | r, or, if Directors or Officers have not bee | n selected, an |
| Printed Na | me: Juan Antonio Quintero | Title: Country ! | Manager | |
| Required : | Signature(s) on behalf of Ot | ther Business Ei | ntity: [See below for required signature(s | 3).] |
| - | A | | | |
| Signature: | | 1 | | |
| Printed Na | Juan Antonio Quintero me: | | Title: Managing Member | |
| Signature: | | | | |
| Printed Na | me: | | Title: | |
| Signature: | | | *** | |
| Printed Na | me: | | _ Title: | - |
| Signature: | | | | - |
| Printed Na | me: | | _ Title: | - |
| Signature; | | | | - |
| Printed Na | ime: | | _ Title: | - |
| Signature: | | | | - |
| Printed Na | ime: | | _ Title: | - |
| If Florida | General Partnership or Lir | pited Liability l | Partnership: | |
| Signature of | of one General Partner. | | | |
| | | | | |
| | Limited Partnership or Lir of ALL General Partners. | nited Liability I | Limited Partnership: | |
| Signatures | of ALL General Faturers. | | | |
| If Florida Signature | Limited Liability Company of a Member or Authorized R | y: Representative. | | |
| | | | | |
| All others Signature | :: of an authorized person. | | | |
| Fees: | | | | |
| | ertificate of Conversion: | | \$35.00 | |
| _ | es for Florida Articles of Inc | orporation: | \$70.00 | |
| Co | ertified Copy: | | \$8.75 (Optional) | |
| C | ertificate of Status: | | \$8.75 (Optional) | |

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

| The name of the corporation shall be: | gantine Corporation |
|--|--|
| The name of the corporation shall be. | · · · · · · · · · · · · · · · · · · · |
| ARTICLE II PRINCIPAL OFFICE | |
| The principal place of business/mailing address is: | |
| Principal street address | Mailing address, if different is: |
| 1110 Brickell Ave | |
| Suite 430K | |
| Miami, Florida 33131 | |
| ARTICLE III PURPOSE | |
| The purpose for which the corporation is organized is: | |
| This company is organized primarily to engage in insurance | e, financial and credit services, |
| and other commercial activities, as well as to conduct any | other lawful business in the United States and abroad. |
| | |
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| | |
| ADTICLE III CHADEC | |
| ARTICLE IV SHARES The number of shares of stock is: | |
| | |
| ARTICLE V INITIAL OFFICERS AND/OR D | DIRECTORS |
| Name and Title: Juan Antonio Quintero Country Manager | Name and Title: |
| 1110 Brickell Ave. Suite 430K | |
| Address: | Address: |
| Miami, Florida 33131 | |
| Name and Title: | Name and Title: |
| Name and Title: | Name and Title: |
| Address: | Address: |
| | |
| | |
| Name and Title: | Name and Title: |
| Address: | Address: |
| | |
| | |

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Juan Antonio Quintero Country Manager Name: 1110 Brickell Ave. Suite 430K Address: Miami, Florida 33131 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Juan Antonio Quintero Country Manager Name: 1110 Brickell Ave. Suite 430K Address: Miami, Florida 33131 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 10/19/2019 Required Signature/Registered Agent 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. 10/19/2019 Required Signature/Incorporator Date

ARTICLE VI REGISTERED AGENT