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(Requestor's Name)				
(Address)				
(Address)				
(City/S	State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Busin	ness Entity Na	me)		
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				





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COVER LETTER

	ing Section of Corporations		
SHBJFCT:	GAMD Trac	de Inc	
	Name o	of Resulting Florida	Profit Corporation
	rticles of Conversion, Articles orida Profit Corporation" in a		d fees are submitted to convert the following eligible 07.11933 & 607.0202. F.S.
Please return all	correspondence concerning the	nis matter to:	
<u> </u> Raber	na Arauz		
	Contact Person		
Atplu.	5 CORP		
	Firm/Company		
8180 1	NW 30th Jt. #	404	
	Address		
DORAL	, FL 33166		
	City. State and Zip Co	de	
GAMD	TRADE @ GMOI dress: (to be used for future an	1 COM	
E-mail add	lress: (to be used for future an	nual report notificati	on)
For further infor	mation concerning this matter	, please call:	
IRase	ema Graviz	at (305)	406 - 3800
Nam	ne of Contact Person	Area Co	de and Daytime Telephone Number
Enclosed is a che	eck for the following amount:		
□ \$105.00 Filin	ng Fees ⊠\$113.75 Filing Fee and Certificate of Status	s □\$113.75 Filing and Certified Cop	~
New Fil Division P.O. Bo	g Address: ling Section n of Corporations ox 6327 ssec. FL 32314	[] 2	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Conversion

For

Converting Eligible Entity

Into

Florida Profit Corporation

The Articles of Conversion <u>and attached Articles of Incorporation</u> are submitted to convert the following <u>eligible</u> <u>business entity into a Florida Profit Corporation</u> in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:
GAMD TRADE LLC
Enter Name of the Converting Entity
The converting entity is a Limited Liablility Company
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)
irst organized, formed or incorporated under the laws of FL
(Enter state, or if a non-U.S. entity, the name of the country)
"August 9, 2019
Enter date "Converting Entity" was first organized, formed or incorporated.
GAMD TRADE INC
Enter Name of Florida Profit Corporation
. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its urrent/organic jurisdiction.
. 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 isted as the document's effective date on the Department of State's records.

Signed	thisday of	. 20		
Requir	red Signature for Florida Profit Corporatio	on:		
Signati	ure of Director. Officer, or, if Directors or Off	icers have not been selected, an Inco	orporator:	
Printed	Name: Gustavø J. Faria Title: Pr	esident	- -	
Requir	red Signature(s) on behalf of Converting Fl	orida partnerships, limited partne	erships, and lin	nited liability
compa	inies: [See below for required signature(s).]			
Signati Printed	Gustavo J. Faria	Title: MGR		
	are:			
	l Name:			
Signatu	ire:			
Printed	Name:	Title:		
Signati	are:			
Printed	Name:	Title:		
Signati	ire:			
Printed	Name:	Title:		
Signati	are:			
Printed	Name:	Title:		20 Ji
	ida General Partnership or Limited Liabili ire of one General Partner.	ty Partnership:		
	ida Limited Partnership or Limited Liabili ires of <u>ALL</u> General Partners.	ty Limited Partnership:		.1 7: 25
	ida Limited Liability Company: ure of a Member or Authorized Representative	<u>.</u>	•	S
All oth Signate	ers: are of an authorized person.			
Fees:	Articles 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 FOR RESULTING FLORIDA PROFIT CORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporation shall be: GAMD TR	ADE INC
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
9805 NW 52nd ST #214	9805 NW 52nd ST #214
DORAL, FL 33178	DORAL, FL 33178
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
To engage in any and all activiti	es services lawfully allowed
	72
The number of shares of stock is: 100	-
	- #
ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: Gustavo J. Faria / President	>- Ch
Address: 9805 NW 52nd St #214	Name and Title: Address:
Doral, Fl 33178	Address.
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:

Name:

Address:

Doral, FL 33178

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

Date