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Special Instructions to	Filing Officer:	

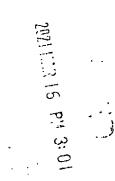
Office Use Only

J. FASON MAR 2 4 2021



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# **COVER LETTER**

Name of Resulting Florida Profit Corporation  The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S.  Please return all correspondence concerning this matter to:  Jorge Huertas  Contact Person  Freedomtax Accounting & Multiservices, Inc.  Firm/Company  1016 E Osceola Pkwy  Address  Kissimmee, FL 34744  City. State and Zip Code  carlosrubiom@protonmail.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Jorge Huertas  at (407 ) 344-1012  Name of Contact Person  Enclosed is a check for the following amount:  \$\begin{array}{c} \text{S105.00 Filing Fees} \text{ S113.75 Filing Fees} \text{ and Certified Copy.} \text{ Certificate of Status}  \text{Mailing Address:} \text{ New Filing Section} \text{ Division of Corporations}	TO: New Filing Section Division of Corporations				
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Contact Person  Freedomtax Accounting & Multiservices, Inc.  Firm/Company  1016 E Osceola Pkwy  Address  Kissimmee, FL 34744  City. State and Zip Code  Carlosrubiom@protonmail.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Jorge Huertas  Name of Contact Person  Enclosed is a check for the following amount:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	Please return all correspondence concerning this	s matter to:			
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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    Street Address: New Filing Section Division of Corporations   Division of Corporations   Division of Corporations   Division of Corporations   Area Code and Daytime Telephone Number    Area Code and Daytime Telephone Number     \$113.75 Filing Fees  □\$122.50 Filing Fees.     Certified Copy. and Certificate of Status	For further information concerning this matter.	please call:			
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■ \$105.00 Filing Fees	Name of Contact Person				
and Certificate of Status  Mailing Address: New Filing Section Division of Corporations  And Certified Copy Certified Copy, and Certificate of Status  Street Address: New Filing Section Division of Corporations  Division of Corporations	Enclosed is a check for the following amount:				
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Division of Corporations Division of Corporations					
D.O. D. (227)	_		Divisi	on of Corporations	
P.O. Box 6527 The Centre of Tallanassee  Tallahassee FL 32314 2415 N. Monroe Street, Suite 810	P.O. Box 6327			entre of Tallahassee	

Tallahassee, FL 32303



January 20, 2021

JORGE HUERTAS 1016 E OSCEOLA PKWY KISSIMMEE, FL 34744

SUBJECT: VIRTUAL PHINANSE, INC.

Ref. Number: W21000005436

We have received your document for VIRTUAL PHINANSE, INC. and your check(s) totaling \$105.00. However, the document has not been filed and is being retained in this office for the following:

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

Jessica A Fason Regulatory Specialist II

Letter Number: 121A00001281

## **Articles of Conversion**

For

### **Converting Eligible Entity**

Into

#### Florida Profit Corporation

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

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:
VIRTUAL PHINANSE, L L C.
Enter Name of the Converting Entity
2. The converting 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  (Fator state, or if a non LLS, entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
on 08/28/2020
Enter date "Converting Entity" was first organized, formed or incorporated.
3. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u> VIRTUAL PHINANSE, INC.
Enter Name of Florida Profit Corporation
4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.
5. If not effective on the date of filing, enter the effective date: 01/01/2021
(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florid 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 30th day o	<sub>of</sub> December			·	
Requir	ed Signature for Flo	rida Profit Corporatio	<u>n:</u>			
		or, if Directors or Off	icers have not bee	en selected, an Inco	orporator:	
		. Rubia	9			
Printed	Name: Carlos C	Rubio Title: Pre	esident	<del></del>	_	
Requir	ed Signature(s) on bo	ehalf of Converting Florequired signature(s).]	<u>orida partnershi</u>	ps, limited partne	erships, and lin	nited liability
		9s C. K	uhia			
		. Rubio				
Signatu	re;				<del></del>	
Printed	Name:	<del></del>	Title:			
Signatu	re:					
Printed	Name:		Title:			
Signatu	re:					
Printed	Name:	<u>.                                    </u>	Title:		<del></del>	
Signatu	ire:			<del></del> -		
Printed	Name:		Title:			
Signatu	ire:					
Printed	Name:		Title:			
	ida General Partners ire of one General Par	ship or Limited Liabili tner.	ity Partnership:			
	ida Limited Partners ires of <u>ALL</u> General F	ship or Limited Liabili Partners.	ity Limited Parti	nership:		
	<u>ida Limited Liability</u> ire of a Member or Au	· <u>Company:</u> uthorized Representative	e.			
All oth Signatu	ers: ure of an authorized po	erson.				
Fees:	Articles of Conversion Fees for Florida Artic Certified Copy: Certificate of Status:	cles of Incorporation:	\$35.00 \$70.00 \$8.75 (Optic \$8.75 (Optic			

# ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE II The principal p	PRINCIPAL OFFICE blace of business/mailing address is:	
	Principal street address	Mailing address, if different is
10761 G	Sarden Lily Dr	PO Box 620667
Orlando	, FL 32832	Orlando, FL 32862
The purpose f	T PURPOSE or which the corporation is organized is: all lawful purposes.	
The number o	SHARES Shares of stock is: 100	
The number o	shares of stock is: 100 OFFICERS AND/OR DIRECTORS	Name and Title:
The number o	shares of stock is:	Name and Title:Address:
The number o  ARTICLE 1  Name and Tit	of shares of stock is: 100  OFFICERS AND/OR DIRECTORS  Le: Carlos C. Rubio, President	
The number o  ARTICLE 1  Name and Tit  Address:	of Shares of Stock is: 100  OFFICERS AND/OR DIRECTORS  le: Carlos C. Rubio, President  PO Box 620667	Address:
The number o  ARTICLE 1  Name and Tit  Address:	Carlos C. Rubio, President PO Box 620667 Orlando, FL 32862	Address:
The number o  ARTICLE I  Name and Tit  Address:  Name and Tit  Address:	OFFICERS AND/OR DIRECTORS le: Carlos C. Rubio, President PO Box 620667 Orlando, FL 32862	Address:  Name and Title:

# ARTICLE VI REGISTERED AGENT

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

Name:

Carlos C. Rubio

Address:

10761 Garden Lily Dr

Orlando, FL 32832

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

12/30/2020

Date