P21000026636

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

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2021 FEB 18 PH 1:



February 18, 2021

MARK IACONO, ESQ. SALTER MCGOWAN SYLVIA & LEONARD, INC. 56 EXCHANGE TERRACE, 5TH FLOOR PROVIDENCE, RI 02903

SUBJECT: WARRICK AVENUE HOLDINGS, INC.

Ref. Number: W21000022570

We have received your document for WARRICK AVENUE HOLDINGS, INC. and your check(s) totaling \$682.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Conversion must be sign on behalf of other business,

Please return the corrected original and one copy of 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.

Letter Number: 621A00003645

Tyrone Scott Regulatory Specialist II New Filings Section

www.sunbiz.org

District of Comparations D.O. DOV 0007 Well-based File 11, 2001

COVER LETTER

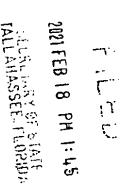
TO:	New Filing Section Division of Corporations	•	,		
SHRI	ECT: Warwick Avenue Ho	oldings, In	IC.		
3000		of Resulting Flo		Corporation	
	iclosed Articles of Conversion, Articles into a "Florida Profit Corporation" in a	•			wing eligible
Please	return all correspondence concerning the	his matter to:			
Mar	k lacono, Esq.				
	Contact Person				
Salt	er McGowan Sylvia & Le	eonard, Ir	ıc.		
_	Firm/Company				
56 E	Exchange Terrace, 5th F	loor			
	Address	-			
Prov	vidence, RI 02903				
	City, State and Zip Co	de			
	cono@smsllaw.com				
E	-mail address: (to be used for future and	nual report noti	fication)		
	her information concerning this matter				
Marl	k lacono	_at (401	<u>,</u> 274	1-0300	
	Name of Contact Person	Are	a Code and	Daytime Telephone Number	
Enclose	d is a check for the following amount:				
□ \$105	i.00 Filing Fees \$\Bigsilon\$\$\\$\$113.75 Filing Fees and Certificate of Status	s □\$113.75 F and Certified	_	☐\$122.50 Filing Fees. Certified Copy, and Certificate of Status	
	Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		New I Divisi The C	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

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:
Warwick Avenue Holdings, Inc.
Enter Name of the Converting Entity
2. The converting entity is a Corporation
(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 Rhode Island
(Enter state, or if a non-U.S. entity, the name of the country)
on 4/16/2010
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> Warwick Avenue Holdings, 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: 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 isted as the document's effective date on the Department of State's records.



Signed this 10 H day of De (Wobs)	
Required Signature for Florida Profit Corporation:	
Signature of Director, Officer, or, if Directors or Office	
Printed Name:Title:	
companies: [See below for required signature(s).]	ida partnerships, limited partnerships, and limited liability
Signature:	
Printed Name: Gabriela Goldberg	_ Title: President
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida General Partnership or Limited Liability Signature of one General Partner.	Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	
All others: Signature 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)

he principal place of business/mailing address is: Principal street address Principal street address Mailing address, if diff 4339 Avalon Court Naples, FL 34119 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Real Estate Holding Company	fferent is:	
4339 Avalon Court Naples, FL 34119 ARTICLE III PURPOSE The purpose for which the corporation is organized is:	flerent is:	
Naples, FL 34119 ARTICLE III PURPOSE The purpose for which the corporation is organized is:		
ARTICLE III PURPOSE The purpose for which the corporation is organized is:		
The purpose for which the corporation is organized is:		
		2
	TALL A MA	222
	S 2 2	<u>∞</u>
	<u> </u>	6h :1 Hd
ARTICLE IV SHARES The number of shares of stock is: 100	10(86)	<u>P</u>
ARTICLE V OFFICERS AND/OR DIRECTORS		
Name and Title: Gabriela Goldberg, President Name and Title: MartinGoldberg, Name and Title: MartinGoldberg, Name and Title: Name and Title: Name and Title: MartinGoldberg, Name and Title: Name and Name and Title: Name and Name an	Vice Presider	nt —
Address: 4339 Avalon Court Address: 4339 Avalon	Court	
Naples, FL 34119 Naples, FL 34	4119	
Rame and Title: Allan D. Goldberg, Treasurer Name and Title: Allan D. Goldber	erg, Secretary	y
4339 Avalon Court Address: 4339 Avalon		_
Naples, FL 34119 Naples, FL 34	4119	_
Name and Title:Name and Title:		
Address: Address:		

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

Allan D. Goldberg

dress:

Allan D. Goldberg

Hard Associated agent to accept service of process for the above stated corporation at the place designated in secretificate. I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Required Signature/Registered Agent