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(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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(Document Number)
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COVER LETTER

Division of Co					
SUBJECT: ADAMO IM	IPORTS, INC				
SUBJECT.	Name of	Resulting Flo	orida Profit	Corporation	
	e of Conversion, Articles Profit Corporation" in ac	•		ees are submitted to convert an 15, F.S.	"Other Business
Please return all corresp	ondence concerning this	matter to:			
ENRIQUE R CORREA					
	Contact Person				1
PARAMOUNT ENTERI	PRISES MULTI SERVICE	S			1
	Firm/Company				
2136 MICHIGAN AVE					·~>
	Address				2021
KISSIMMEE, FL 34744					
	City, State and Zip Code	2			
INFO@CENTERCITYT	AXPLUS.COM				<u> </u>
E-mail address: (t	o be used for future anni	ial report not	ification)		39
For further information	concerning this matter.	please call:			
ENRIQUE CORREA		_at (20170	03	
Name of Co	ontact Person	Ar	ea 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	☐\$113.75 and Certific	_	☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS: New Filings Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	Circle		New F Division P. O. F	ING ADDRESS: illings Section on of Corporations Box 6327 assec, 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. 607.111.	5, Florida Statutes.
1. The name of the "Other Business Entity" immediately prior to the filing of this C	ertificate of Conversion is:
ADAMO IMPORTS LLC	
Enter Name of Other Business Entity	·
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY	1
(Enter entity type. Example: limited liability company, limit general partnership, common law or business trust, etc.)	ed partnership,
first organized, formed or incorporated under the laws of FLORIDA (Enter state, or if a non-U.S. entity, the name of the content of the conte	overtex)
01/27/2020 on	ountry)
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 organized, formed or incorporated: 4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles or</u> 	
ADAMO IMPORTS, INC	
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 thi Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing r listed as the document's effective date on the Department of State's records.	• • •
Page 1 of 2	
	. j 1.

Signed thisday of	20 <mark></mark>
Required Signature for Florida Profit Corporation:	
Signature of Chairman, Vice Chairman, Director, Offic Incorporator: ENRIQUE CORREA Printed Name: JUAN RODRIGUEZ Title: CHAIR.	er, or, if Directors or Officers have not been selected, an
Required Signature(s) on behalf of Other Business F	Intity: [See below for required signature(s).]
Signature The Feet	
JUAN RODRIGUEZ Printed Name:	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida General Partnership or Limited Liability Signature of one General Partner. If Florida Limited Partnership or Limited Liability	
Signatures of <u>ALL</u> 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: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)

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

ADTICLE II DDINGBAL OFFICE	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
867 ANSLEY WAY	SAME AS PRINCIPAL
MOUNT DORA FL 32757	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized	l is:
TO PROPERLLY STRUCTURE ENTITY TO ALLOV	V FUTURE SHARE HOLDER'S ALSO TO ULTILIZE
SOLO 401 K SCORP RETIREMENT OPTIONS.	
	(***) ***
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	<u>:</u>
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	<u> </u>
ARTICLE IV SHARES 100	39
The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/O	D DIDECTORS
JUAN RODRIGUEZ	
Name and Title:	Name and Title:
5867 ANSLEY WAY	Address:
\ddress:	
MOUNT DORA FL 32757	
MOUNT DORA FL 32757	
MOUNT DORA FL 32757	
MOUNT DORA FL 32757 Name and Title:	Name and Title:
MOUNT DORA FL 32757 Name and Title: Address:	Name and Title:Address:
MOUNT DORA FL 32757 Name and Title: Address:	Name and Title:Address:
MOUNT DORA FL 32757 Name and Title: Address:	Name and Title: Address:

ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: JUAN RODRIGUEZ Name: 5867 ANSLEY WAY Address: MOUNT DORA FL 32757 ARTICLE VII **INCORPORATOR** The name and address of the Incorporator is: **ENRIQUE CORREA** Name: 2136 MICHIGAN AVE Address: KISSIMMEE, FL 34744 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 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. 03/1/21 Required Signature/Incorporator