P21 000071140

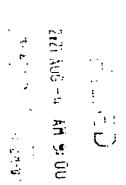
| (Requestor's Name) |
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| (Address) |
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| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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06/10/21--01017--011 **105.00







FLORIDA DEPARTMENT OF STATE Division of Corporations

June 18, 2021

OLIVIA PLOUFF 2737 NW 21ST ST MIAMI, FL 33142

SUBJECT: PIZZACINI

Ref. Number: W21000089451

We have received your document for PIZZACINI and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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.

Lillie S Kervin Regulatory Specialist II

Letter Number: 521A00013826

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COVER LETTER

| TO: New Filing Section Division of Corporations | | | | |
|--|------------------------------------|---|------------|------------|
| DIZZACINI | | | | |
| SUBJECT: | Resulting Florida P | rofit Corporation | | |
| The enclosed Articles of Conversion, Articles of entity into a "Florida Profit Corporation" in acc | | | | ligible |
| Please return all correspondence concerning thi | s matter to: | | | |
| Piervalerio Vignola | | | | |
| Contact Person | | | | |
| PIZZACINI | | | £ ~· | |
| Firm/Company | | | ŽBŽÍ AUG | |
| 2737 NW 21st ST | | | <u></u> | · - |
| Address | | | · - | Γ |
| Miami, FL 33142 | | | AT UU | C ⊅ |
| City, State and Zip Cod | c | | | |
| piervalerio@pizzacini.co | | | | |
| E-mail address: (to be used for future ann | ual report notification | on) | | |
| For further information concerning this matter, | · | | | |
| Piervalerio Vignola | $_{at}$ (786) | 765-6075 | | |
| Name of Contact Person | Area Cod | le and Daytime Telepho | one Number | |
| Enclosed is a check for the following amount: | | | | |
| ■ \$105.00 Filing Fees □\$113.75 Filing Fees and Certificate of Status | □\$113.75 Filing and Certified Cop | | and | |
| Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 | N D | treet Address: Tew Filing Section Division of Corporation The Centre of Tallahas | | |

2415 N. Monroe Street, Suite 810

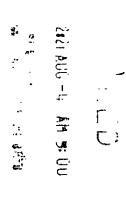
Tallahassee, FL 32303

Tallahassee, FL 32314

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 im | mediately prior to the filing of the Articles of Conversion is: |
|--|---|
| PIZZACINI LLC | C20-389664 |
| | Enter Name of the Converting Entity |
| 2. The converting entity is a LIMITE | ED LIABILITY COMPANY |
| (Enter entity type, | Example: limited liability company, limited partnership, nip, common law or business trust, etc.) |
| first organized, formed or incorporated u | nder the laws of FLORIDA |
| (Enter sta | te, or if a non-U.S. entity, the name of the country) |
| on 12/14/2020 | |
| Enter date "Conv | erting Entity" was first organized, formed or incorporated. |
| | |
| 3. The name of the Florida Profit Corpor | ration as set forth in the attached Articles of Incorporation: |
| PIZZACINI CORP. | |
| | Enter Name of Florida Profit Corporation |
| 4. This conversion was approved by the current/organic jurisdiction. | eligible converting entity in accordance with this chapter and the laws of its |
| 5. If not effective on the date of filing, e | |
| (The effective date: Cannot be prior to Department of State.) | o nor more than 90 days after the date this document is filed by the Florida |
| | oes not meet the applicable statutory filing requirements, this date will not be a the Department of State's records. |
| | |



| ' , Signed th | is 28 day of July | , ₂₀ 21 | | | |
|------------------------|---|--|-----|------------------|-------|
| _ | Signature for Florida Profit Corporation: | , 20 | | | |
| Signature | of Director, Officer, or, if Directors or Office wa Playf /MGR ame: Olivia Plouff Title: MG | • | | | |
| Printed N | ame: Olivia Plouff Title: MG | K | | | |
| companie | Signature(s) on behalf of Converting Flories: [See below for required signature(s).] | | | ed liab | ility |
| Signature | Piervalerio Vignola | | | | |
| Printed N | _{ame:} Pier valerio V ignola | _ Title: CEO | | | |
| Signature | : <u></u> | | | | |
| Printed N | ame: | Title: | | | |
| Signature | · | | | | |
| Printed N | ame: | _ Title: | | | |
| Signature | : | | | | |
| Printed N | ame: | Title: | | | |
| Signature | : | · · · · · · · · · · · · · · · · · · · | | | |
| Printed N | ame: | Title: | | | |
| Signature | : | | | | |
| Printed N | ame: | Title: | 5 , | 26 | |
| | a General Partnership or Limited Liability of one General Partner. | Partnership: | | À ÁUG - | |
| | a <u>Limited Partnership or Limited Liability</u> is of <u>ALL</u> General Partners. | Limited Partnership: | ٠. | 290 280 28 | 110 |
| | a Limited Liability Company: of a Member or Authorized Representative. | | | An Un Ou | () |
| All other Signature | s: of an authorized person. | | | | |
| F C | Articles of Conversion: lees 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 II PRINCIPAL OFFICE The principal place of business/mailing address is: | | |
|--|--|-------------------------|
| Principal street address | Mailing add | lress, if different is: |
| 2737 NW 21st ST | | ucas, ii direcent is. |
| Miami, FL 33142 | | |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: Wholesale Italian food distrib | oution | |
| | | |
| | | |
| | | |
| | | |
| ARTICLE IV SHARES The number of shares of stock is: | | |
| the number of shares of stock is. | | |
| ARTICLE V OFFICERS AND/OR DIRECTORS | | 2 |
| Name and Title: PIERVALERIO VIGNOLA/ CEO | Name and Title: | 2821 AU |
| Name and Title: Standards: Discrete v OFFICERS AND/OR DIRECTORS PIERVALERIO VIGNOLA/ CEO 5300 PASEO BLVD, APT 1908 | | 2#27 AUL -4 |
| Name and Title: PIERVALERIO VIGNOLA/ CEO Standards: DORAL, FL 33166 OLIVIA PLOUEE/ MGR | Name and Title:Address: | A* |
| Name and Title: PIERVALERIO VIGNOLA/ CEO Same and Title: DORAL, FL 33166 Vame and Title: OLIVIA PLOUFF/ MGR 10222 NW 64TH WAY, APT 101 | Name and Title: Address: Name and Title: | . A |
| Name and Title: DORAL, FL 33166 Name and Title: OLIVIA PLOUFF/ MGR | Name and Title:Address: | A A |
| Name and Title: PIERVALERIO VIGNOLA/ CEO Standards: DORAL, FL 33166 Value and Title: OLIVIA PLOUFF/ MGR 10222 NW 64TH WAY, APT 101 | Name and Title: Address: Name and Title: | AM SE CO |

| The <u>name</u> | and Florida street address (P.O. Box NOT acco | eptable) of the registered agent is: |
|-----------------|---|--|
| Name: | Olivia Plouff/ MGR | |
| Address: | 10222 NW 64TH WAY, APT 101 | |
| | DORAL, FL 33178 | |
| | | |
| | | |
| | | f process for the above stated corporation at the place designated in ent as registered agent and agree to act in this capacity |
| Dlu | va Italik /MGR | 7/28/2021 |
| | /MGR Required Signature/Registered Agent | Date |

ARTICLE VI REGISTERED AGENT