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DATE:

9/22/21

NAME: NEMIX. LLC

TYPE OF FILING: CONVERSION

COST:

105.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

## 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 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 Nemix, LLC	is:
Enter Name of the Converting Entity	<b>-</b> '
limited liability company L21000285729	
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)  Florida	•
first organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, the name of the country) 12/07/2007	
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> Nemix Corp	
Enter Name of Florida Profit Corporation	
4. This conversion was approved by the eligible converting entity in accordance with this chapter as current/organic jurisdiction.	nd the laws of its
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 Department of State.)	filed by the Florida
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the listed as the document's effective date on the Department of State's records.	nis date will not be



	this 21st day of September	
•	ed Signature for Florida Profit Corporat	
- <u>-</u>		Officers have not been selected, an Incorporator:
Signatu	Steven Easimira	Theels have not been selected, an theorporator.
	Stoven Kazimrev Pro	esident
Printed	Steven Kazimirov Pre	
		Florida partnerships, limited partnerships, and limited liabi
compa	nies: [See below for raquired signature(s).]	
Signatu	Steven Kazimirov	<u> </u>
D ' 1	Steven Kazimirov	Member
Printed	Name:	Title:
Signatu	ıre:	
Printed	Name:	Title:
Signatu	ire:	
Printed	Name:	Title:
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Printed	Name:	Title:
Signatu	ire:	
Printed	Name:	Title:
Signatu	ıre:	
Printed	Name:	Title:
If Flor	<u>ida General Partnership or Limited Liab</u>	oility Partnership:
	ure of one General Partner.	
	<u>ida Limited Partnership or Limited Liab</u>	ility Limited Partnership:
Signatu	res of ALL General Partners.	
	ida Limited Liability Company:	
Signatu	ire of a Member or Authorized Representati	ive.
<u>All oth</u> Signatu	<u>ers:</u> are of an authorized person.	
Fees:		
_	Articles of Conversion:	\$35.00 \$70.00
	Fees for Florida Articles of Incorporation: Certified Copy:	\$8.75 (Optional)
	Certificate of Status:	\$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 NEMIX CORP The name of the corporation shall be:	
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
4350 NW 19TH AVE, STE C	4350 NW 19TH AVE, STE C
POMPANO BCH, FL 33064	POMPANO BCH, FL 33064
ARTICLE III PURPOSE  The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS	20
	2021 SER
	2
ARTICLE IV SHARES 1,000 The number of shares of stock is:  ARTICLE V OFFICERS AND/OR DIRECTORS Steven Kazimirov, President Name and Title:  4350 NW 19TH AVE STE C	Steven Kazimirov, Vice Pres. Name and Title:
Address: 4350 NW 19TH AVE, STE C POMPANO BCH, FL 33064	Address: 4350 NW 19TH AVE, STE C POMPANO BCH, FL 33064
Oksana Kazimirov, Secretary Name and Title:	Name and Title:
Address: 4350 NW 19TH AVE, STE C POMPANO BCH, FL 33064	Address:
Name and Title:	Name and Title:
Address:	Address:
<del></del>	

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ARTICL	E VI REGISTERED AGENT	•
	e and Florida street address (P.O. Box NOT	acceptable) of the registered agent is:
	Steven Kazimirov	
Name:		
Address:	4350 NW 19TH AVE. STE C	
	POMPANO BCH, FL 33064	
	POWFANO BOTH, FE 33004	
******	***********	******
Having be	een named as <mark>registered agent to accept ser</mark> vi	ce of process for the above stated corporation at the place designated i
this certif	icate, I am familiar with and accept the appoi	ntment as registered agent and agree to act in this capacity
	DocuSigned by:	
	Steven kazimiran	9/3/2021
	Required Signature/Registered Agent	Date
	· · · · · · · · · · · · · · · · · · ·	