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(Re	questor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Name)
(Dx	ocument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO:

New Filing Section Division of Corporations

SUBJECT: STATUS ALERT FOR EMERGENCY, LLC.

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:

IAN-ILLYCH MARTINEZ, ESQ

BELLO & MARTINEZ, PLLC.

Firm/Company

2850 S. DOUGLAS RD., SUITE 303

Address

CORAL GABLES FL 33134

City, State and Zip Code

imartinez@bmrlawgroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Status

IAN ILLYCH MARTINEZ

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

and Certificate of

and Certified Copy

□ \$105.00 Filing Fees ■\$113.75 Filing Fees □\$113.75 Filing Fees, Certified Copy, and Certificate of Status

Mailing Address:

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

New Filing Section Division of Corporations The Centre of Tallahassee 2415 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:
STATUS ALERT FOR EMERGENCY, LLC.
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
(Enter state, or if a non-U.S. entity, the name of the country)
on 06/03/2019
Enter date "Converting Entity" was first organized, formed or incorporated.
3. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
STATUS ALERT FOR EMERGENCY, 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: 10/15/2021
(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida 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 15 day of OCTOBE	ER20_21
Required Signature for Florida Profit Corpora	tion:
Signature of Director, Officer, or, if Directors or C	•
thainaine Palp	en
Printed Name: CHARMAINE H KALPEN Title:	<u> </u>
Required Signature(s) on behalf of Converting companies: [See below for required signature(s). Signature: Likewiczes	7
Printed Name: Charmaine H. Kalpe	en Title: Member
Signature:	
Printed Name:	
Signature:	· · · · · · · · · · · · · · · · · · ·
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida General Partnership or Limited Liab Signature of one General Partner.	bility Partnership:
If Florida Limited Partnership or Limited Liab Signatures of <u>ALL</u> General Partners.	pility Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representat	tive.
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)

RTICLE II PRINCIPAL OFFICE	
he principal place of business/mailing address is:	
Principal street address	Mailing address, if different SAME
Number 104	J. VII.
Dania Beach FL 33004	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Any and all lawful purposes.	
	
ARTICLE IV SHARES 1000	
ARTICLE IV SHARES The number of shares of stock is: 1000	
ARTICLE V OFFICERS AND/OR DIRECTORS CHARMAINE H KALPEN PTVS	
ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: CHARMAINE H. KALPEN PTVS	Name and Title:
ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: CHARMAINE H. KALPEN PTVS 4 ddress: 3604 S W S Young Drive Apt 222	
ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: CHARMAINE H. KALPEN PTVS 3604 S.W.S.Young Drive Apt 222	Name and Title:
ARTICLE V OFFICERS AND/OR DIRECTORS Same and Title: CHARMAINE H. KALPEN PTVS Address: 3604 S W S Young Drive Apt 222	Name and Title:Address:
ARTICLE V OFFICERS AND/OR DIRECTORS CHARMAINE H. KALPEN PTVS 3604 S W S Young Drive Apt 222 Killeen TX 76542 Name and Title:	Name and Title: Address: Name and Title:
ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: CHARMAINE H. KALPEN PTVS 3604 S W S Young Drive Apt 222 Killeen TX 76542 Name and Title:	Name and Title:Address:
ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: CHARMAINE H. KALPEN PTVS 3604 S W S Young Drive Apt 222 Killeen TX 76542 Name and Title:	Name and Title: Address: Name and Title:
ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: CHARMAINE H. KALPEN PTVS 3604 S W S Young Drive Apt 222 Killeen TX 76542 Name and Title: Address:	Name and Title: Address: Name and Title: Address:
ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: CHARMAINE H. KALPEN PTVS 3604 S W S Young Drive Apt 222 Killeen TX 76542 Name and Title: Address:	Name and Title: Address: Name and Title: Address: Name and Title:
ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: CHARMAINE H. KALPEN PTVS 3604 S W S Young Drive Apt 222 Killeen TX 76542 Name and Title: Address:	Name and Title: Address: Name and Title: Address:
ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: CHARMAINE H. KALPEN PTVS 3604 S W S Young Drive Apt 222 Killeen TX 76542 Name and Title: Address:	Name and Title: Address: Name and Title: Address: Name and Title:
ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: CHARMAINE H. KALPEN PTVS 3604 S W S Young Drive Apt 222 Killeen TX 76542 Name and Title: Address:	Name and Title: Address: Name and Title: Address: Name and Title:

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<u>ARTICLE VI REGISTERED AGENT</u>
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name:

BELLO & MARTINEZ, PLLC.

A.ddress:

2850 S. DOUGLAS ROAD SUITE 303

CORAL GABLES FL 33134

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

10/15/2021

Date