P72000067387

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

Office Use Only



200387875272

05/23/22--01036--004 **113.75





COVER LETTER

Division of Corporations	٠
SUBJECT: Medkick	•
	Ilting Florida Profit Corporation
The enclosed Articles of Conversion, Articles of Incentity into a "Florida Profit Corporation" in accordance	orporation, and fees are submitted to convert the following eligible nee with ss. 607.11933 & 607.0202. F.S.
Please return all correspondence concerning this mat	iter to:
Sadik Bizanti	
Contact Person	
Medkick	
Firm/Company	
640 Clematis St #2733	
Address	
West Palm Beach, FL 334	01
City, State and Zip Code	
dr.bizanti@med-kick.com	
E-mail address: (to be used for future annual re	
For further information concerning this matter, pleas Sadik Bizanti	
Name of Contact Person	305 753-4452 Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:	The same and
	113.75 Filing Fees □\$122.50 Filing Fees.
-	Certified Copy Certified Copy, and Certificate of Status
Mailing Address: New Filing Section	Street Address:
Division of Corporations	New Filing Section Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE Division of Corporations

__ /ED

2022 JUL 26 AM II: 33

"FERATIONS

June 16, 2022

SADIK BIZANTI 640 CLEMATIS ST #2733 WEST PALM BEACH, FL 33401

SUBJECT: MEDKICK

Ref. Number: W22000081783

We have received your document for MEDKICK and your check(s) totaling \$113.75. 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.

Jessica A Fason Regulatory Specialist II

Letter Number: 022A00013470

Sorry for mistake Please find the corrections on the Flaing

www.sunbiz.org

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.

	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, for	rmed or incorporated under the laws of Florida
-	(Enter state, or if a non-U.S. entity, the name of the country)
April - 4	- 2018
	Enter date "Converting Entity" was first organized, formed or incorporated.
3. The name of the Medkick	e Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
	Enter Name of Florida Profit Corporation

- 5. If not effective on the date of filing, enter the effective date: May 5 2022

 (The effective date: Company of the control of the contr
- (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.

FILED.
2022 JUL 26 M 8: 37

Signed this 17th day of May	<u> </u>			
Required Signature for Florida Profit Corporation	<u>n:</u>			
Signature of Director, Officer, oraif Directors or Officer	cers have not been selected, an Incorporator:			
Sadik Bizanti For	under / CEO			
Printed Name: Sadik Bizanti Title: Founder / CEO				
Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies: [See below for required signature(s):]				
Signature:	<u></u>			
Printed Name: Sadik Bizanti	_{Title:} Founder / CEO			
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 Partnership: Signature of one General Partner.				
If Florida Limited Partnership o<u>r</u> Limited Liability Signatures of ALL General Partners.	v 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)			

\$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)

The name of the corporation shall be: Medkick	Inc
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
640 Clematis St #2733	
West Palm Beach, FL 33401	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Help structure the coorporation	to better suit the business need
The corporation is buit to hel	
By proactively reaching out to p	
ARTICLE IV SHARES The number of shares of stock is: 10,000,000 ARTICLE V OFFICERS AND/OR DIRECTORS	
Name and Title: Sadik Bizanti, CEO	Name and Title:
Address: 1069 vista palma way Orlando, FL 32825	Address:
Name and Title:	Name and Title:
Address:	Address:
Name and Title:	Name and Title:
Address:	Address:

ARTICLE VI REGISTERED AGENT

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

Name:

Sadik Bizanti

Address:

1069 Vista Palma way

Orlando, FL 32825

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-

05/17/2022

Date

7022 JUL 26 AM 8: 3