

P230000008415

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

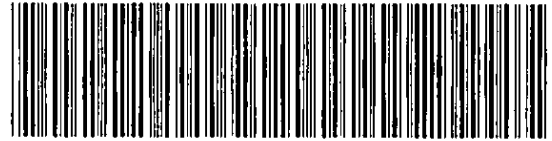
(Document Number)

Additional Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400399745444

FILED


2023 JAN -5 PM 4:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



JAN 5 2023 3:26

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 304004 7227993
AUTHORIZATION : 
COST LIMIT : \$ 105.00

ORDER DATE : January 3, 2023

ORDER TIME : 2:11 PM

ORDER NO. : 304004-010

CUSTOMER NO: 7227993

DOMESTIC AMENDMENT FILING

NAME: BAD-ADZ, INC.

EFFECTIVE DATE:

XX CONVERSION AND FORMATION
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER'S INITIALS: _____

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Bad-Adz, Inc.

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:

David Kahan

Contact Person

Kahan & Kligler, P.A.

Firm/Company

6420 Congress Ave., Ste 1800

Address

Boca Raton, FL 33487

City, State and Zip Code

david@dkpalaw.com

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

For further information concerning this matter, please call:

David Kahan at (561) 672-8330

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> \$105.00 Filing Fees | <input type="checkbox"/> \$113.75 Filing Fees
and Certificate of
Status | <input type="checkbox"/> \$113.75 Filing Fees
and Certified Copy | <input type="checkbox"/> \$122.50 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:

Bad-Adz, Inc.

Enter Name of the Converting Entity

2. The converting entity is a profit corporation

(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 Rhode Island

(Enter state, or if a non-U.S. entity, the name of the country)

on November 14, 2017

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**:

Bad-Adz, 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: filing date

(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
2023 JAN -5 PM 4:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signed this 2nd day of January, 2023.

Required Signature for Florida Profit Corporation:

Signature of Director, Officer, or, if Directors or Officers have not been selected, an Incorporator:

Printed Name: Joel M. Albrizio Title: President

Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies: [See below for required signature(s).]

Signature: _____

Printed Name: Joel M Albrizio Title: President

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 or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
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

The name of the corporation shall be: Bad-Adz, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

515 E. Las Olas Blvd., Ste 120-E
Ft. Lauderdale, FL 33301

38 Church Street
Pawtucket, RI 02860

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful purpose

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V OFFICERS AND/OR DIRECTORS

Name and Title: Joel M. Albrizio, Presiden

Address: 431 Pine Tree Ct.
Atlantis, FL 33462

Name and Title: Joel M. Albrizio, Treasure

Address: 431 Pine Tree Ct.
Atlantis, FL 33462

Name and Title: Douglas J. Fleurant, CFC

Address: 73 Old Nasonville Rd.
Harrisville, RI 02830

Name and Title: Joel M. Albrizio, Director

Address: 431 Pine Tree Ct.
Atlantis, FL 33462

Name and Title: Joel M. Albrizio, Secreta

Address: 431 Pine Tree Ct.
Atlantis, FL 33462

Name and Title: Jennifer Albrizio, Ass. Se

Address: 431 Pine Tree Ct.
Atlantis, FL 33462

2028 JAN -5 PM 4:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLE VI REGISTERED AGENT


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

Name: Joel M. Albrizio

Address: 431 Pine Tree Ct.

Atlantis FL 33462

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

01/02/2023

Date