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

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.. COVER LETTER

TO:	New Filing Section			
	Division of Corporations			

SUBJECT: TRIFITY EXPRESS, 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:

IGOR TRIFONOV	
Contact Person	
TRIFITY EXPRESS, INC.	
Firm/Company	
6500 MALONEY AVE LOT 56	
Address	
KEY WEST FL 33040	

City. State and Zip Code

igor.trif@yahoo.com

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

For further information concerning this matter, please call:

IGOR TRIFONOV	_at (305	699-9673	
Marian Communication			

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$105.00 Filing Fees = \$113.75 Filing Fees and Certificate of and Certified Copy Status □ \$122.50 Filing Fees □ \$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 <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.

TRIFITY EXPRESS, INC.	5:
Enter Name of the Converting Entity	÷
2. The converting entity is a FOR PROFIT CORPORATION	
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)	
tirst organized, formed or incorporated under the laws of LLLINOIS (Enter state, or if a non-U.S, entity, the name of the country)	
on 10/21/2015	
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> TRIFITY EXPRESS, INC.	<u>1:</u>
Enter Name of Florida Profit Corporation	
4. This conversion was approved by the eligible converting entity in accordance with this chapter an current/organic jurisdiction.	d 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 f Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this listed as the document's effective date on the Department of State's records.	•
	10.5 M 8 / 18 M 3.01

•	•		
igned this 21	day of MARCH	23	
Required Signature	for Florida Profit Corporation:	:	
	r. Officer, or, if Directors or Office	ers have not been selected, an Incorpo	mior
Printed Name: 1GC	OR TRIFONOV Lide: PRI	ESIDENT	
Required Signatur companies: See be	e(s) on behalf of Converting Flor clow for required signature(s).	rida partnerships, limited partnershi	ps, and limited liability
Signature.	<u> </u>		
Printed Name::-	ice. 2 /12/18.00	_ Title: Pacsifert	_
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Litie:	
Signature:			
Printed Name:		Title:	
Signature:			 —
Printed Name		Litte:	
Signature:			
Printed Name:		litte:	
If Florida General Signature of one Ge	Partnership or Limited Liability eneral Partner.	y Partnership:	
If Florida Limited Signatures of ALL	Partnership or Limited Liability General Partners.	Limited Partnership:	ASS.
If Florida Limited Signature of a Mem	<u>Liability Company:</u> ther or Authorized Representative.		10 20 10 10 10 10 10 10 10 10 10 10 10 10 10

All others: Signature of an authorized person.

Fees:

Articles of Conversion:

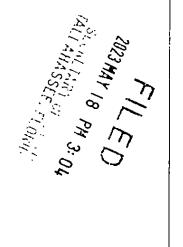
Fees for I forida Articles of Incorporation;

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 The principa	II PRINCIPAL OFFICE I place of business/mailing address is:		
	Principal street address	Mailing add	ress, if different is:
6500 N	MALONEY AVE LOT 56		
KEY W	EST FL 33040		
	III PURPOSE For which the corporation is organized is: ND ALL LEGAL BUSINESS	PURPOSES	
			
			
ARTICLE I	IV SHARES 1000		SECTION SALLA
ARTICLE	V OFFICERS AND/OR DIRECTORS		TALLAWASSE
ARTICLE	V OFFICERS AND/OR DIRECTORS itle: IGOR TRIFONOV / PRESIDENT	Name and Title:	FALLA HASSEE F
ARTICLE	V OFFICERS AND/OR DIRECTORS	Name and Title: Address:	FALLAWASSEE, RICOLD
ARTICLE	V OFFICERS AND/OR DIRECTORS itle: IGOR TRIFONOV / PRESIDENT		FALLAHASSEE FLORM
ARTICLE Name and T	V OFFICERS AND/OR DIRECTORS itle: G500 MALONEY AVE LOT 56	Address:	3.04
ARTICLE Name and Ti Address: Name and Ti	V OFFICERS AND/OR DIRECTORS itle: IGOR TRIFONOV / PRESIDENT 6500 MALONEY AVE LOT 56 KEY WEST FL 33040	Address: Name and Title:	3.04
ARTICLE Name and T	V OFFICERS AND/OR DIRECTORS itle: IGOR TRIFONOV / PRESIDENT 6500 MALONEY AVE LOT 56 KEY WEST FL 33040 itle:	Address: Name and Title: Address:	3:04
ARTICLE Name and Ti Address: Same and Ti Address:	V OFFICERS AND/OR DIRECTORS itle: IGOR TRIFONOV / PRESIDENT 6500 MALONEY AVE LOT 56 KEY WEST FL 33040 itle:	Address: Name and Title: Address:	3:04

The <u>name</u>	and Florida street address (P.O. Box NOT acceptal	le (of the registered agent is:	
Name:	IGOR TRIFONOV		
Address:	6500 MALONEY AVE LOT 56 9		
	KEY WEST FL 33040		
******	******		
Having be this certific	en named as registered agent to accept service of pro- cate, I am familiar with and accept the appointment of	cess for the above stated corporation at the place designated s registered agent and agree to act in this capacity	in
	1,1	03/21/2023	
/	Required Signature Registered Agent	Date	

ARTICLE VI REGISTERED AGENT