P23000055572

(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:





600411808646

07/07/23--01016--019 **122.50



COVER LETTER

Division of Co							
SUBJECT: TAPIS	SIPAT, INC.						
		Resulting Flor	ida Profit	Corporation	••		
	of Conversion, Articles or Profit Corporation" in acc	-		are submitted to convert 233 & 607,0202, F.S.	the following	eligit	ole
Please return all corres	pondence concerning thi	s matter to:					
Sylvain Stock	less						
	Contact Person						
Tapisipat, Inc							
	Firm/Company						
195 Avenue [NW C						
	Address				S 5	7073	
Winter Haven	ı, FL 33881				SECTION AND SECTION OF TALL WILLIAMS SEED STATE	=======================================	1
	City. State and Zip Cod	<u>e</u>	-		iAS _S	1	
	ocommercialflo					:	
E-mail address: (to be used for future ann	ual report notif	ication)		EL LATE	, 1	
	n concerning this matter,	•					
Sylvain Stock		at (321 _)900)-3361 	_		
Name of C	ontact Person	Area	Code and	l Daytime Telephone Nun	nher		
Enclosed is a check for	r the following amount:						
☐ \$105.00 Filing Fees	■ \$113.75 Filing Fees and Certificate of Status	□\$113.75 Fi and Certified		■\$122.50 Filing Fees. Certified Copy, and Certificate of Status			
Mailing Add New Filing S Division of C P.O. Box 632	ection Corporations		New I Divisi	Address: filing Section on of Corporations entre of Tallahassee			

Tallahassee, FL 32314

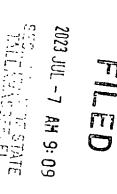
2415 N. Monroe Street, Suite 810

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:
TAPISIPAT, INC.
Enter Name of the Converting Entity
2. The converting entity is a 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 Canada
(Enter state, or if a non-O.S. entity, the name of the country)
September 24, 1999
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> TAPISIPAT, 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: (The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florid 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 29th	_{day of} June	. 20 23	·
Required Signature 1	for Florida Profit Corpor	ration:	
	Officer, or, if Directors or	Officers have not been selected, an Inco	orporator:
Printed Name: Sylv	vain Stockle	President	
companies: See belo	ow for required signature(s		
Signature:			
Printed Name Sylv	ain Stockless	_{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 Pa Signature of one Gene	artnership or Limited Liz eral Partner.	ability Partnership:	
If Florida Limited P: Signatures of <u>ALL</u> Ge		ability Limited Partnership:	
If Florida Limited Li Signature of a Membe	i <mark>ability Company:</mark> r or Authorized Represent	ative.	
All others: Signature of an author	rized person.		2023 J STOLL

\$35.00

\$70,00

\$8.75 (Optional)

\$8.75 (Optional)

Fees:

Articles of Conversion:

Certified Copy:

Certificate of Status:

Fees for Florida Articles of Incorporation:

F IL E D

23 JUL −7 AH 9: 09

ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

<u>ARTICLE I</u>	I PRINCIPAL OFFICE		
he principal	place of business/mailing address is:		
95 Avenue D NV	Principal street address	Mailing address, if different is:	
Winter I	Haven, FL 33881		_
- -			
	for which the corporation is organized is:		
=looring	g installation.		_
			~
			-
			-
· 			-
·			-
ARTICLE	V SHARES 400		-
ARTICLE I	v shares of shares of stock is:		-
he number o	of shares of stock is: 100 V OFFICERS AND/OR DIRECTO	<u>RS</u>	-
he number o	of shares of stock is: 100 V OFFICERS AND/OR DIRECTO	<u>RS</u>	-
The number of th	of shares of stock is:	RS SiC Name and Title:	-
The number of th	of shares of stock is:	RS SIC Name and Title: Address:	-
The number of ARTICLE Name and Ti Address:	v of stock is: 100 v of ficers and/or director tle: Sylvain Stockless, Pres 195 Avenue D NW	RS SIC Name and Title: Address:	-
The number of ARTICLE Name and Ti Address:	V OFFICERS AND/OR DIRECTOR 10: Sylvain Stockless, Pres 195 Avenue D NW Winter Haven, FL 3388	RS SiC Name and Title: Address: Name and Title: Addrese: Addre	
The number of ARTICLE Name and Tr Address:	V OFFICERS AND/OR DIRECTOR 1le: Sylvain Stockless, Pres 195 Avenue D NW Winter Haven, FL 3388	RS SiC Name and Title: Address: Name and Title: Address: Address:	
The number of ARTICLE Name and Ti Address: Name and Ti Address:	V OFFICERS AND/OR DIRECTOR tle: Sylvain Stockless, Pres 195 Avenue D NW Winter Haven, FL 3388	RS SiC Name and Title: Address: Name and Title: Address:	
The number of ARTICLE Name and Ti Address: Name and Ti Address:	V OFFICERS AND/OR DIRECTOR tle: Sylvain Stockless, Pres 195 Avenue D NW Winter Haven, FL 3388	RS SiC Name and Title: Address: Name and Title: Address:	

ARTICLE VI REGISTERED AGENT

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

Name:

Tania Stockless

Address:

195 Avenue D NW

Winter Haven, FL 33881

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

6/29/2023

Date