

P24000011811

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2024 Jan 16 10:06:54

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:

HAPPIERBITS 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 **10/23/23**

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**:

HAPPIERBITS 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 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.

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Signed this 12TH day of JANUARY, 2024.

Required Signature for Florida Profit Corporation:

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

X

Printed Name: WARNER JIMENEZ Title: President

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

Signature: X

Printed Name: WARNER JIMENEZ Title: MGR

Signature: X

Printed Name: FABIOLA BRICENO Title: AMBR

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)

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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: HAPPIERBITS INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address
2715 BISCOTTO CIRCLE

Mailing address, if different is:

DAVENPORT , FL 33897

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

WELL BEING PRODUCTS AND SERVICES, E-COMMERCE

ARTICLE IV SHARES

The number of shares of stock is: 1 MILLION

ARTICLE V OFFICERS AND/OR DIRECTORS

Name and Title: WARNER JIMENEZ (PRESIDENT)

Address: 2715 BISCOTTO CIRCLE
DAVENPORT , FL 33897

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: FABIOLA BRICENO (VICE PRESIDENT)

Address: 2715 BISCOTTO CIRCLE
DAVENPORT , FL 33897

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: FABIOLA BRICENO
Address: 2517 BISCOTTO CIR
DAVENPORT , FL 33897

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:

X 

Required Signature/Registered Agent

01/12/2024
Date

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FABIOLA BRICENO