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| | (Requestor's Name) |
|---------------------|--------------------------|
| | (Address) |
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| | (City/State/Zip/Phone #) |
| PICK-J | TIAW MAIL |
| | (Business Entity Name) |
| | (Document Number) |
| Certified Copies | Certificates of Status |
| Special Instruction | s to Filing Officer |
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3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

| D | 04/07/2021 Acc#!20160000073 | |
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| | Acc#I20160000072 | |
| Name: | House of Athlete Enterprises, LLC | |
| Document #: | | |
| Order #: | 13604313-44 | |
| Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: | ☐ 1-2 filing. Conversion fir | st. |
| Certified Copy of | ☐ Please keep together. | |
| Apostille/Notarial Certification: | Country of Destination: Number of Certs: | |
| Filing: 🚺 | Certified: ☐ Plain: ✓ COGS: ☐ | |
| Availability Document Examiner Updater Verifier W.P. Verifier Ref# | Amount: \$ 25.00 | |

Thank you!

COVER LETTER

| TO: | Registration So Division of Co | | | |
|-----------------------|--|---|--|---|
| SHRJ | IECT: House of A | athlete Enterprises, LLC | | |
| 0020 | | Name of Florida I | Limited Liability Company | |
| Limit | nclosed Articles ed Liability Con 1045, F.S. | of Conversion and fee npany" into an "Other | e(s) are submitted to co Business Entity" in ac | onvert a Florida cordance with |
| Pleas | e return all corre | spondence concerning | this matter to: | |
| Норс | Newsome | _ | | |
| | | Contact Person | | |
| Virtus | LLP | | | |
| _ | | Firm/Company | | |
| 9100 | Conroy Windenner | | <u> </u> | |
| | | Address | | |
| Wind | ermere, FL 34786 | | | |
| | C | ity, State and Zip Code | | |
| | some@virtus.law | be used for future annual re | eport notification) | |
| | | on concerning this mat | | |
| Норс | Newsome | | _ at (⁴⁰⁷) | |
| | Name of Contact Pe | erson | Area Code and Day | time Telephone Number |
| Enclo | osed is a check f | or the following amou | nt: | |
| ≡ \$2 | 25.00 Filing Fcc | S30.00 Filing Fee and Certificate of Status | □\$55.00 Filing Fee and Certified Copy | ☐ \$60.00 Filing Fee, Certified Copy, and Certificate of Status |
| Regi Divis P.O. | ing Address: stration Section sion of Corporat Box 6327 thassee, FL 3231 | | Street Addre Registration: Division of C The Centre of 2415 N. Mon Tallahassee, | Section Corporations f Tallahassee troe Street, Suite 810 |

CR2E106 (05/17)

Articles of Conversion

For

Florida Limited Liability Company

Into

"Converted or Other Business Entity"

The Articles of Conversion is submitted to convert the following Florida Limited Liability Company into an "Other Business Entity" in accordance with s. 605.1045, Florida Statutes.

| 1. The name of the Florida Limited Liability Company converting into the "Other Business Entity" is: |
|---|
| House of Athlete Enterprises, LLC |
| Enter Name of Florida Limited Liability Company |
| 2. The name of the "Converted or Other Business Entity" is: |
| House of Athlete Enterprises, LLC |
| Enter Name of "Converted or Other Business Entity" |
| 3. The "Converted or Other Business Entity" is a [Limited Liability Company (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.) |
| organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the name of the country) The formation document is attached (if applicable). |
| 4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S. |
| 5. This conversion shall be effective in Florida on: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date of the conversion under the laws governing the "Other Business Entity.") |
| 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. |

| 6. | If the "Converted or Other Business Entity" is an out-of-state entity not registered to | 0 |
|----|---|---|
| | transact business in Florida, the "Converted or Other Business Entity": | |

a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to 605.0117 and Chapter 48.

| Street Address: | 1495 N Park Drive | | |
|--|---|---|---------------|
| | Weston, FL 33326 | | |
| Mailing Address: | | | |
| 7. The "Converted or appraisal rights the and 605.1061-605 | amount to which such mem | agreed to pay any members hat obers are entitled under ss. 605 | ving .1006 |
| Signed this | day of | | 21 |
| Signature:ttope | Newsome | | |
| <u></u> | Must be signed by a Member | r or Authorized Representative | |
| Printed Name: Ho | pe NewsomeTitle: | Authorized Representative | |
| Fees: Filing Fee: Certified Cop | \$25.00 y: \$30.00 (Option Status: \$5.00 (Option Status: \$5.00 (Option Status) | | |

Page 2 of 2