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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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| то: | O: New Filing Section Division of Corporations | | | | | |
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| SHR | IECT: KONNE | CT, LLC | | | | |
| 5017 | <u> </u> | (Name of Re | sulting Florida Lii | nited Co | mpany) | |
| | | | | | nd fees are submitted to convert a accordance with s. 605.1045, F.S. | n "Othe |
| Pleas | e return all corr | espondence concernir | ig this matter to |); | | |
| Antho | ony Morales | | | | | |
| | | (Contact Person) | • | | | |
| MyUS | SACorporation.co | om | | | | |
| | | (Firm/Company) | | _ | | |
| 1 Rac | lisson Plaza, suit | e | | | | |
| | | (Address) | | | | |
| New I | Rochelle, NY 108 | 301 | | | | |
| | (1 | City, State and Zip Code) | ···· | | | |
| info@ | myusacorporatio | n.com | | | | |
| E-0 | mail Address: (to b | oe used for future annual re | eport notifications |) | | |
| For fu | urther informati | on concerning this ma | itter, please cal | 1: | | |
| Antho | ny Morales | | at (| , 330 | -2677 | |
| | (Name of Conto | act Person) | (Area Coc | le) (Da | ytime Telephone Number) | |
| | | for the following amou | | s proces | sed by this office must be payable | in US |
| (\$25 fo & \$12 | 50.00 Filing Fees or Conversion 5 for Articles anization) | ☐\$155.00 Filing Fees and Certificate of Status | #\$180.00 Fili and Certified C | _ | □\$185.00 Filing Fees, Certified Copy, and Certificate of Status | |
| | Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I | ection Corporations 27 | | New Divis The C | Et Address: Filing Section Sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303 | 5923 |

INHS11 (7/17)

12; PKI2: 14

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045. Florida Statutes.

| 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: PME, LLC |
|--|
| (Enter Name of Other Business Entity) |
| 2. The "Other Business Entity" is a |
| (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc. |
| First organized, formed or incorporated under the laws of |
| (Enter state, or if a non-U.S. entity, the name of the country) |
| 06/29/2020 |
| (date of organization, formation or incorporation) |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: |
| KONNECT, LLC |
| (Enter Name of Florida Limited Liability Company) |
| 4. If not effective on the date of filing, enter the effective date: |
| (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar 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. |
| 5. The plan of conversion has been approved in accordance with all applicable statutes. |
| 6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605, 1006 and 605, 1061-605, 1072. F.S. |

| Signed this 13th day of January | 20_23 |
|---|--|
| Signature of Authorized Representative of Limi | ited Liability Company: |
| Signature of Authorized Representative: | Title: Member |
| Signature(s) on behalf of Other Business Entity: | |
| Signature: | |
| Printed Name: Alexander Valdes | Title: Member |
| Signature: | |
| Signature:Printed Name: | Title: |
| Signature: | |
| Signature:Printed Name: | Title: |
| Signature: | |
| Printed Name: | Title: |
| Signature: | |
| Signature:Printed Name: | Title: |
| Signature: | |
| Signature:Printed Name: | Title: |
| If Florida Corporation: | |
| Signature of Chairman, Vice Chairman, Director, or | Officer. |
| If Directors or Officers have not been selected, an Inc | corporator must sign. |
| If Florida General Partnership or Limited Liabili | ty Partnership: |
| Signature of one General Partner. | |
| If Florida Limited Partnership or Limited Liabili Signatures of <u>A5.L.</u> General Partners. | ty Limited Partnership: |
| All others: Signature of an authorized person. | |
| Fees: | |
| Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: | \$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| The name of the Limit | | is: | |
|---|--|--|---|
| KONNECT, LLC | | | |
| (Must co | intain the words "Limited Lia | ability Company, "L.L.C.," o | r "LLC.") |
| ARTICLE II - Addre The mailing address ar | | e principal office of th | ne Limited Liability Company is: |
| Principal Office Add | ress: | Mailing Addre | <u>ss:</u> |
| 9950 SW 107th Ave STI | E 100 | 9950 SW 107th A | Ave STE 100 |
| Miami, FL 33176 | Miami, FL 33176 | | |
| The name and the Flor | rida street address of t | | <u></u> |
| | iN. | ame | |
| | 888 67th Court North | | |
| F | lorida street address (| P.O. Box <u>NOT</u> accept | able) |
| Lox | kahatchee | FL 33470 | |
| | City | Zip | |
| liability company registered agent and statutes relating to | at the place designate agree to act in this ca the proper and completions of my position as | d in this certificate, I l pacity. I further agree ete performance of my | process for the above stated limited nereby accept the appointment as to comply with the provisions of all duties, and I am familiar with and rovided for in Chapter 605, F.S |
| | | | 2623 |

(CONTINUED)

21. PHI2: 15

ARTICLE IV-

as provided for in s.817.155, F.S.

ALEXANDER VALDES

The name and address of each person authorized to manage and control the Limited Liability Company:

| Title: | Name and Address: | | |
|--|---------------------------------------|--|--|
| "AMBR" = Authorized Member | | | |
| "MGR" = Manager | | | |
| AMBR | Alexander Valdes 2510 Inagua Ave | | |
| | | | |
| | Miami, FL 33133 | | |
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| (Use attachment if necessary) | | | |
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| A. D. 1 | | | |
| CLE V: Other provisions, if any. | | | |
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| REQUIRED SIGNATURE: | | | |
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| and the same of th | | | |
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Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)

any false information submitted in a document to the Department of State constitutes a third degree felony

SPECIAL AND REVOCABLE LIMITED POWER OF ATTORNEY

TO ALL PERSONS, be it known, that INCORP SERVICES, INC., a Nevada corporation ("Grantor"), does hereby make and grant a limited and specific power of attorney to Anthony Morales and appoint and constitute said individual as its attorney-in-fact ("Attorney-in-Fact"). This Special and Revocable Limited Power of Attorney hereby revokes any and all former powers of attorney given by Grantor to Attorney-in-Fact.

Attorney-in-Fact shall have the limited power and authority to undertake, commit and perform only the following acts on Grantor's behalf to the same extent as if Grantor had done so personally, all with full power of substitution and revocation in the presence:

Authority to accept appointment as registered agent on behalf of Grantor, for entities which MyUSACorporation.com, a Wyoming corporation, has purchased resident agent service on or through their account with Grantor. After each exercise of such authority, Attorney-in-Fact shall notify Grantor of the same.

TERMINATION: Unless sooner revoked or terminated by Grantor, this Special and Revocable Limited Power of Attorney shall become NULL and VOID from and after December 31st, 2023.

| Louise Breytenbach, Chie | f Operating Officer | Dated: January 10 th , 2023 |
|--------------------------|---------------------|--|
| STATE OF NEVADA |) | |
| COUNT OF CLARK |) ss) | |

This Special and Revocable Limited Power of Attorney was acknowledged before me on January 10th, 2023, by Louise Breytenbach, as Chief Operating Officer of InCorp Services, Inc., a Nevada corporation.

lotary Public, State of Hevada

Appointment No. 21-0243-01

Notary Public in the State of Nevada

My Commission Expires: June 10, 2025