# L24000213768

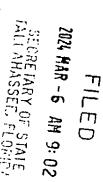
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W24000051652





000424895750

03/06/24: -01019--020 \*\*150.00



# **COVER LETTER**

TO:	New Filing S Division of C				
SHRI	IFCT: Titan Ca	pital Partners, LLC			
30Б9		(Name of Res	sulting Florida Lim	ted Cor	npany)
			•		nd fees are submitted to convert an "Othe ecordance with s. 605.1045, F.S.
Pleaso	return all corr	espondence concernin	g this matter to:		
Darrel	II T. Hanna				
		(Contact Person)		_	
Titan	Capital Partners	LLC			
		(Firm/Company)		-	
575 S	. Wickham Road	I, Suite F #505			
		(Address)		-	
Melbo	ourne, FL 32904				
	(1	City, State and Zip Code)		-	
suev@	titanllc.net				
E-n	nail Address: (to b	e used for future annual re	port notifications)	_	
For fu	irther informati	on concerning this ma	tter, please call:		
Susar	n Vasiliadis		_at (	641-	0315
_	(Name of Conta	act Person)	(Area Code	) (Day	ytime Telephone Number)
		or the following amou a bank located in the		proces	sed by this office must be payable in US
(\$25 fo & \$125	i0.00 Filing Fees or Conversion 5 for Articles anization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee.	ection Corporations 27		New Divis The C	et Address: Filing Section tion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

# **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:  Titan Capital, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Nevada
(Enter state, or if a non-U.S. entity, the name of the country)
09/10/2018 on .
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Titan Capital Partners, 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.
PILED  7011 HAR-6 AM 9: 02  PALLAHASSEE, FLORING

Signed this 01	day of March	20 <u>24</u> .
Signature of Authori	zed Representative of Limit	ed Liability Company:
Signature of Authorize Printed Name: Darrell T	ed Representative:	Title: CEO
Signature(s) on behalf	Fol Other Business Entity: [S	See below for required signature(s)]
Signature:	ARRELL T. HANNA	Title:
Signature:		
Printed Name:		Title:
Signature:		Title:
		Time.
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signatura		
Printed Name:		Title:
If Florida Corporation	n·	
	 Vice Chairman, Director, or O	officer.
	have not been selected, an Inco	
If Florida Canarat Pa	rtnership or Limited Liability	Doutnouching
Signature of one Gener		rarmer <u>smp.</u>
If Florida Limited Par Signatures of <u>ALL</u> Ger	rtnership or Limited Liability neral Partners.	Limited Partnership:
All others: Signature of an authoriz	zed person.	

\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees:

Articles of Conversion:

Certified Copy: Certificate of Status:

Fees for Florida Articles of Organization:

PILED 2014 HAR -6 AM 9: 03 SECRETARY OF STATE ALLAHASSEE, FLORID,

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		Titan Capital Partners, LLC	
(Mus	it contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Ade			
The mailing address	s and street address of the	e principal office of the Limited	Liability Company is:
Principal Office A	ddress:	Mailing Address:	
575 S. Wickham Roa	d, Suite F #505	P.O. Box 411638	
Melbourne, FL 32904	ļ	Melbourne, FL 32941	
· DEVOLUE III - D		Office & Designated Ages	
(The Limited Liability Co business entity with an a	mpany cannot serve as its own Rective Florida registration.)	-	dividual or another  2024 MAR SECRET
(The Limited Liability Co business entity with an a	mpany cannot serve as its own Retive Florida registration.)  Torida street address of the Corporation Service Comp	egistered Agent. You must designate an in he registered agent are:	FIL SECRETARY FALLAHASSE
(The Limited Liability Co business entity with an a	mpany cannot serve as its own Retive Florida registration.)  Torida street address of the Corporation Service Comp	egistered Agent. You must designate an in he registered agent are:	FILE C  2024 MAR - 6 AM  SECRETARY OF FALLAHASSEE. F
(The Limited Liability Co business entity with an a	mpany cannot serve as its own Retive Florida registration.)  Florida street address of the Corporation Service Components No. 1201 Hays Street	egistered Agent. You must designate an in the registered agent are:  pany arme  P.O. Box <u>NOT</u> acceptable)	FILE C  2024 MAR - 6 AM  SECRETARY OF FALLAHASSEE. F
(The Limited Liability Co business entity with an a	mpany cannot serve as its own Retive Florida registration.)  Florida street address of the Corporation Service Components No. 1201 Hays Street	egistered Agent. You must designate an in he registered agent are: pany ame	FIL SECRETARY FALLAHASSE

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

Judith Reyes, Asst Secy

(CONTINUED)

#### ARTICLE IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Galaxy Capital Inc., by Darrell T. Hanna CEO of Manager
	575 S. Wickham Road, Suite F #505
	Melbourne, FL 32904
<del></del>	
	•
<del></del>	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
(Use attachment if necessary)  CLE V: Other provisions, if any.  REQUIRED SIGNATURE:	DITA
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, I am aware tha
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.  Darrell T. Hanna	

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)