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COVER LETTER

TO:	New Filing Section Division of Corporations		
SUBJ:	CCT: MANDATE TO ELEVATE LLC		
	(Name of Resulting Florida Limited Company)		
	closed Articles of Conversion, Articles of Organization, and fees are submitted to coss Entity" into a "Florida Limited Liability Company" in accordance with s. 605.10		
Please	return all correspondence concerning this matter to:		
	RIAH: BYRON EDGINGTON (Contact Person)		
M	Firm/Company)		
	(Firm/Company)		~3
1/15	E. TWIGGS ST. # 2101 (Address)	2007	
	(Address)	•	
11	MPA FL 33602 (City. State and Zip Code)		
	(City. State and Zip Code)		;;a
	ATETOELEVATE C GMAIL. COM		ا ب
E-m	il Address: (to be used for future annual report notifications)	う테	: ა
For fur	ther information concerning this matter, please call:	·	
Br	RON EDGWGTON at (904) 907-0645 (Name of Contact Person) (Area Code) (Daytime Telephone Number)		
	ed is a check for the following amount: (All checks processed by this office must be and drawn on a bank located in the United States)	: payablo	e in US
(\$25 for	00 Filing Fees		
	Mailing Address:Street Address:New Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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 MANDIATE TO ELEVATE LLC (エロルA)	of Conver	sion is	:
(Enter Name of Other Business Entity)			
2. The "Other Business Entity" is a LLC-P			
(Enter entity type. Example: corporation, limited partnership, general partnership, common la	iw or busine	ess trust.	, etc.)
First organized, formed or incorporated under the laws of	me of the cc	ountry)	
(date of organization, formation or incorporation)		,	
3. The name of the Florida Limited Liability Company as set forth in the attached Article	s of Orga	nizati	on:
MANDATE TO ELEVATE LLC (Enter Name of Florida Limited Liability Company)			
(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 of 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 we 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 which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	rights the	amoun	t to
		á	
	. • •	:	77
		•	- 12.22 - 12.22 - 12.22
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Signed this 16th day of MA	7 20 24
Signature of Authorized Representati	ve of Limited Liability Company:
Signature of Authorized Representatives Printed Name: BYRB ESGING	Taw Title: U COO
	ss Entity: [See below for required signature(s)]
Signature: Marish Edgle Printed Name: MARIAH EDGL	Sator Title: CEO
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, E If Directors or Officers have not been sele	
If Florida General Partnership or Limi Signature of one General Partner.	ted Liability Partnership:
If Florida Limited Partnership or Limi Signatures of ALL General Partners.	ted Liability Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00

Fees for Florida Articles of Organization: \$125.00
Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	:				
MANDATE TO ELEVATE L (Must contain the words "Limited Liabili	LC.	L.L.C.," or "LLC.")		-	
ARTICLE II - Address: The mailing address and street address of the p	rincipal off	ice of the Limite	d Liability C	Compai	ny is:
Principal Office Address:	Mailing	Address:			
1115 E. TWIGGS ST. #2101 TAMPA FL 33602		SAME		,	
33602	-				
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)					
The name and the Florida street address of the	registered a	igent are:			
MARIAH ESGI	waran				
Nam	e				
1115 E. TWIGGS ST.	# 210				
Florida street address (P.C					
TAMPA	Fl.	33602			
<u>TAMPA</u> City		Zip			
Having been named as registered agent and t liability company at the place designated it registered agent and agree to act in this capac statutes relating to the proper and complete accept the obligations of my position as re	n this certificity. I furth performanc	icate, I hereby ac er agree to compl ce of my duties, ar	cept the appo ly with the pr nd I am famil	ointmer rovisior liar wit	nt as ns of all th and
Train E	seto	<u> </u>			
Registered Agent's Sig	natur∉(RE	QUIRED)	1 1	~3	
(CONTIN	NUED)		•	•	
				4	

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	MARIAH EDGWATON 1115 E. TWICOS ST. # 2101 TAMPA FL 33602
MOR	BYRON Edgington 1115 E. TWIGGS ST. #2101 TAMPA FL 33602
	
(Use attachment if necessary)	
TICLE V: Other provisions, if any.	į.
	Em a
REQUIRED SIGNATURE:	/ -

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

YROW EDOWATOW

Typed or printed name of signce

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)