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PICK-UP

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(Business Entity Name)

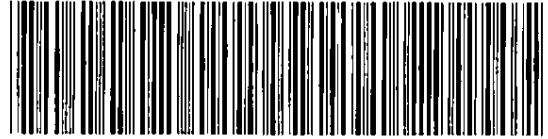
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CLERK OF COURT  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Equinox Advisory Group, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Interest Exchange and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Charles Travis

Name of Person

The Catalyst Global Consulting Group Inc

Firm/Company

8644 Little Swift Circle

Address

Jacksonville, FL 32256

City/State and Zip Code

drt.catalystglobal@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles Travis

at ( 904 ) 613-8469  
Area Code Daytime Telephone Number

Name of Person

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**Important Notice:** Pursuant to s. 605.0212 (11), F.S., as a condition of an interest exchange between a limited liability company and another entity under s. 605.1031, the limited liability company and each other entity that is a party to the interest exchange which exists under the laws of this state, and each party to the interest exchange which exists under the laws of another jurisdiction and has a certificate of authority to transact business or conduct its affairs in this state, must be active and current in filing its annual reports in the records of the department through December 31 of the calendar year in which the articles of interest exchange are submitted to the department for filing.

## ARTICLES OF INTEREST EXCHANGE

Pursuant to section 605.1035, Florida Statutes, I hereby submit the following Articles of Interest Exchange:

**FIRST:** The name of the acquired limited liability company is: Equinox Advisory Group, LLC

The document number of the acquired entity is: L24000280359

**SECOND:** The name of the acquiring entity is: The Catalyst Global Consulting Group Inc

The jurisdiction of formation of the acquiring entity is: Jacksonville, FL Duval County

If applicable, the document number of the acquiring entity is: P17000101861

The acquiring entity is a: Corporation  
(entity type: corp, llc, lp etc.)

**THIRD:** The plan of interest exchange was approved by the acquired limited liability entity in accordance with the provisions of ss. 605.1031-605.1036 and by each member of such limited liability company who, as a result of the interest exchange, will have interest holder liability under s. 605.1033(1)(b) and whose approval is required.

**FOURTH:** The amendments, if any, to the acquired limited liability company's public organic record approved as part of the plan of interest exchange are attached.

(Check One)


- FIFTH:** ☐ The plan of interest exchange was approved by each acquiring entity that is a party to the interest exchange in accordance with the organic laws in its jurisdiction of formation, or
- ☒ The plan of interest exchange approval was not required

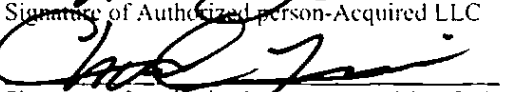
**SIXTH:** The acquiring entity has agreed to pay to any members of the acquired entity with appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072.

**SEVENTH:** The effective date of the interest exchange, if the effective date of the interest exchange is not the same as the date of filing of the articles of interest exchange, subject to the limitations in s. 605.0207 is  
date filed

(Effective date cannot be prior to the date of filing or more than 90 days after the date of filing)

**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.

  
Signature of Authorized person-Acquired LLC

  
Signature of Authorized person- Acquiring Entity

Charles Travis  
Typed or printed name of signature

Charles Travis  
Typed or printed name of signature

Filing Fee: \$25.00  
Certified copy: \$30.00 (optional)

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2024 AUG 20 PM 2:59  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE