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(Requestor's Name)		
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PICK-UP WAIT MAIL		
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SECRETARY OF SPANE FALLAHASSEE, FLORIDA

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COVER LETTER

TQ:	Charter Section Division of Cor				
18112	ECT: Kintsugi Co	ollective Inc.			
3000		Name of	Resulting Florida P	rofit	Corporation
		e of Conversion, Article Profit Corporation'' in ac			ees are submitted to convert an "Other Business 15, F.S.
Please	e return all corresp	pondence concerning thi	s matter to:		
Ambe	er McDaniel				
		Contact Person			
Kintse	ugi Collective LLC	:			
		Firm/Company			
7 Nar	ranja Rd.				
		Address			
Deba	ry, FL 32713				
		City, State and Zip Cod	c		
kintsu	igicollectivellc@gi	mail.com			
	E-mail address: (t	o be used for future ann	ual report notification	n)	
For fu	arther information	concerning this matter.	please call:		
Amber McDaniel		202 6	74-0	904	
Name of Contact Person		Area Code and Daytime Telephone Number		Daytime Telephone Number	
Enclo	sed is a check for	the following amount:			
S 10	05.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	☐\$113.75 Filing F and Certified Copy		☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: New Filings Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			MAILING ADDRESS: New Filings Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314		ilings Section on of Corporations Box 6327

Certificate of Conversion For "Other Business Entity" Into Flurida Profit Corporation

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
Kintsugi Collective LLC #L18-266576
Enter Name of Other Business Entity
2. The "Other Business Entity" is a
(Enter entity type. Example: limited liability company, 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)
11/14/2018 on .
Enter date "Other Business Entity" was first organized, formed or incorporated
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
n/a
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
Kintsugi Collective Inc.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: (The effective date of filing) enter the effective date: (The effective date of filing) enter the effective date:
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

Page 1 of 2

Signed this	n day of	. 20
Required Sig	nature for Florida Profit Corpo	
Signature of C	hairman, Vice Chairman, Directo	ir. Officer, or, if Directors or Officers have not been selected.
Incorporator: Printed Name:	Amber McDaniel Title:	Vice President
		siness Entity: [See below for required signature(s).]
Signature:	Imber SM	10 Doniel
Printed Name:	Amber McDaniel	Title: Vice President
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:	· · · · · · · · · · · · · · · · · · ·	
Printed Name:		Title:
If Florida Ge	neral Partnership or Limited Li ne General Partner.	ability Partnership:
•		ALIII. 12 In A.B. A. L.
	nited Partnership or Limited Li. ALL General Partners.	aninty Limited Partnership:
	nited Liability Company: Member or Authorized Represent	lative.
All others: Signature of a	authorized person.	
Fees:	cate of Conversion:	\$35.00
Fees fo	or Florida Articles of Incorporatio	on: \$70.00
	ed Copy: cale of Status:	\$8.75 (Optional) \$8.75 (Optional)

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I The name of the	NAME corporation shall be:Kints.u	<u>gi Co</u>	llective Inc.	
ARTICLE II		J		
	Principal <u>street</u> address: Natanja Rd. Jebary, FL 32713		Mailing address, if different is: ne as principal street address.	
Colong eage (PURPOSE r which the corporation is organized is: Popular or brain science has discovered that our brain rhythms of joy and rest. At Kintsugi Co	airis are design	rest and personal ground to run on the fuel of joy, and they function to so the fuel of these aspects - nurturing	uth for women.
your joy capa	city through discovering your purpose in	the context of r	elationship, and equipping you to enjoy	
stillness and r	est along the way.			
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTO	ORS	ctors are elected and appointed: As stated	,
	Board member		Board member	
	4602 County Rd 673,#1		7 Naranja Rd	
Name and Title	Bushnell, FL 33513 Denise Flood, Board Member	Name and Title	Debory, FL 32713 Kristy Conway, Board Member	
	760 3rd Street SW	Address:	380 Sky Park Dr	
	Naples, FL 34117		Corydon, IN 47112	
Name and Title		Name and Title:		
Address		Address:		

Name-and Title:	Name and Title:		
Address			
Name and Title:	Name and Title:		
Address			
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT accept	ptable) of the registered agent is:		
Name: Amber McDani	<u>el</u>		
Address: 7 Naranja Rd	<u>. </u>		
Debary, FL 32	713.		
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:			
Name: Amber McDar	riel		
Address: Z Naranja Rd	_		
Debary, FL 3	2713		
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: _\text{IMPCOIOTEU} (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the 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.			
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate. I am familiar with and accept the appointment as registered agent and agree to act in this capacity			
Required Signature of Registered	Agent 8/12/19		
I submit this document and affirm that the facts stated herein are true. 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 x.817.155, F.S.			
Amber SMCDan	il 8/12/19		