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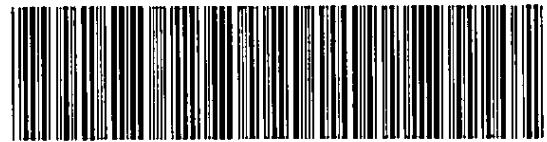
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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 20, 2021

MASHANDA J INNIS  
1616 MCCASKILL AVE AVE 201C  
TALLAHASSEE, FL 32310

SUBJECT: MASHANDA'S WE HELP FOUNDATION INCORPORATED  
Ref. Number: W21000115131

We have received your document for MASHANDA'S WE HELP FOUNDATION INCORPORATED and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

Division of Corporations  
SUBJECT: Mashonda's We Help Foundation Incorporated  
Name of Resulting Florida Profit Corporation

The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S.

Please return all correspondence concerning this matter to:

Mashonda J Inniss  
Contact Person

Mashonda's We Help Foundation Incorporated  
Firm/Company

1616 Mcintosh Ave Apt 201c  
Address

Tallahassee, FL 32310  
City, State and Zip Code

Innissmashanda48a@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LaTanya Spener at (850) 524-91504  
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

\$105.00 Filing Fees  \$113.75 Filing Fees  \$113.75 Filing Fees  \$122.50 Filing Fees,  
and Certificate of and Certified Copy Certified Copy, and  
Status Certificate of Status

**Mailing Address:**  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
New Filing Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Conversion  
For  
Converting Eligible Entity  
Into  
Florida Profit Corporation

The Articles of Conversion and attached Articles of Incorporation are submitted to convert the following eligible business entity into a Florida Profit Corporation in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:

Mashonda's We Help Foundation LLC  
Enter Name of the Converting Entity

2. The converting entity is a LLC  
(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 Florida  
(Enter state, or if a non-U.S. entity, the name of the country)

on April 28<sup>th</sup> 2021  
Enter date "Converting Entity" was first organized, formed or incorporated.

3. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:

Mashonda's We Help Foundation Inc  
Enter Name of Florida Profit Corporation

4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.

5. If not effective on the date of filing, enter the effective date: \_\_\_\_\_.

(The effective date: Cannot be prior to nor more than 90 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.

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Signed this 29<sup>th</sup> day of September, 2021.

Required Signature for Florida Profit Corporation:

Signature of Director, Officer, or, if Directors or Officers have not been selected, an Incorporator:

Mashonda Immiss

Printed Name: Mashonda Immiss Title: Director

Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies: [See below for required signature(s).]

Signature: M. Immiss

Printed Name: Mashonda Immiss Title: Director

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

FL01-3 Rev 6/24

## ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

The name of the corporation shall be:

*Mashonda's We Help Foundation LLC* *Incorporated*

### ARTICLE II PRINCIPAL OFFICE

Principal street address:

*166 McCashill Ave 201C  
Tallahassee, FL 32310*

Mailing address, if different is:

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*Domestic Violence Prevention  
and Services, Non Profit LLC Incorporation*

### ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: As

*provided in the bylaws*

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Mashonda Inniss Name and Title: \_\_\_\_\_

Owner Address: 166 McCashill Ave \_\_\_\_\_

201C Tallahassee, FL  
32310

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

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Address: \_\_\_\_\_ Address: \_\_\_\_\_

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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#### **ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Mashonda Imiss  
Address: 1616 McCashill Ave  
Tallahassee, FL 32310

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#### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Mashonda Imiss  
Address: 1616 McCashill Ave  
Tallahassee, FL 32310

#### **ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (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*

M. Imiss

Required Signature of Registered Agent

8/19/21

Date

*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 s. 817.155, F.S.*

M. Imiss

Required Signature of Incorporator

8/19/21

Date