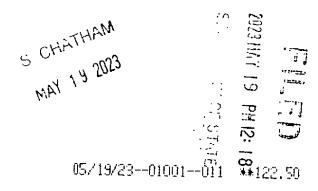
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NAME RELEASE

NILL NOT
REINSTATE NOR REVOKE THE DISSOLUTION OF
Artificial Intelligence Chamber of Commerce Inc.
DOCUMENT NUMBER P2300035676
AND I RELEASE THE NAME FOR USE BY
ANOTHER ENTITY. I will not revocate
the dissolution

Frs

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Artificial Intelligence Chause of Commerce Inc. 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:
Frank Bruno Contact Person
Artificial Intelligence Chamber of Commerce Inc.
5709 South Banna dr
City, State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Frenk Brunt at (8/3) 69 3 82 17 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 and Certificate of and Certified Copy Status ☐ \$122.50 Filing Fees, Certificate Of Status
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 INCORPORATION

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

In cor	nphance with Chapter 617, F.S (Not for Profit)
ARTICLE I NAME The name of the corporation shall be:	iticial Intelligence Chamber of Commerce
ARTICLE II PRINCIPAL OFFICE	
Principal <u>street</u> address: 5709 South Bo	Mailing address, if different is:
Homosassa F	C 34446
industry, and the imp	herests of the artificial intelligence rovement of business conditions within Section 501(c)(b) of the Internal the corresponding Section of any
As stated in th	
ARTICLE V INITIAL OFFICERS AND	
Name and Title: Frank Bry	No Pro Stame and Title:
Address 5709 South	
Homosassa Fl	
Name and Title:	Name and Title:
Address	
Name and Title:	Name and Title:
Address	Address:

Name and Title:	Name and Title:
Address	Address:
Name and Title:	Name and Title:
Address	Address:
	<u> </u>
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acc	controlle) of the registered agent is:
Name: Frank Brand	HAY T
Address: 5709 South	Bauma de
Address.	24446
110 M 6 30356 11 C	34446
ARTICLE VII INCORPORATOR	<i>i</i> ⊤
The <u>name and address</u> of the Incorporator is:	
Name: Frank Bruno	<u> </u>
Address: 5709 South Banan	
Homosassa FL 3	5444 b
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.)
<u>Note:</u> If the date inserted in this block does not meet the document's effective date on the Department of State's re-	applicable statutory filing requirements, this date will not be listed as the ecords.
certificate, I am familiar with and accept the appointment	
Required Signature of Register	5/19/23
Required Signature of Register	ed Agent Date
I submit this document and affirm that the facts stated her the Department of State constitutes a third degree felony	rein are true. I am aware that any false information submitted in a document to as provided for in $s.817.155,F.S.$
Feel Brown Required Signature of Inc.	5/19/23 corporator Daty
Required Signature of Inc	corporator / Daty

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