N2300014513

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COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:		RATE NAME – <u>MUST INC</u>	CLUDE SUFFIX)
Enclosed is an original a	and one (1) copy of the Artic	les of Incorporation and	a check for:
□ \$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee. Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM: Name (Printed or typed)			-
	3809 W Oklahoma Ave	Address	-
	Tampa, Florida 33616	Address	
	Ci	ty, State & Zip	-

Daytime Telephone number

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

(440) 654-9844

matthew@nenos.one

LLC Into non profit

Certificate of Conversion
For

Other Business Entity*
Into
Plorida Profit Corporation
Non Profit

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. 607.4115, Florida Statutes. 1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: nenos, LLC Enter Name of Other Business Entity 2. The "Other Business Entity" is a Limited Liability Company (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 $\underline{}$ (Enter state, or if a non-U.S. entity, the name of the country) 02/25/2021 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; 4. The name of the Florida Protti-Corporation as set forth in the attached Articles of Incorporation: nenos, Inc. Enter Name of Florida Profit Corporation 5. If not effective on the date of filing, enter the effective date: 10/31/2023 (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.

Signed this 30th day of October	. 20_23
Required Signature for Florida Profit Corporation:	
Signature of Chairman, Vice Chairman, Director, Offic Incorporator: Printed Name: Matthew Chernesky Title: Incorpor	er, or, if Directors or Officers have not been selected, an
Required Signature(s) on behalf of Other Business E	Intity: [See below for required signature(s).]
Signature: MC	
Printed Name: Matthew Chernesky	Title: Managing Member
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	_ Title:
Signature:	
Printed Name:	_ Title:
If Florida General Partnership or Limited Liability Signature of one General Partner.	,
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners	Limited Partnersmp.
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	
All others: Signature of an authorized person.	
Fees: Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status.	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)

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

ARTICLE I The name of t	<u>NAME</u> nenos, Inc.		
	PRINCIPAL OFFICE		
3809	Principal <u>street</u> address:) W Okłahoma Ave		Mailing address, if different is:
Tam	pa, Florida 33616		
4RTICLE III The purpose foolline platfor	I <u>PURPOSE</u> For which the corporation is organized is: In, empowering individuals to shape vibr	to amplifying local ant communities and	voices and fostering authentic connections through an drive positive change. Our version is a world where
where commi	unities thrive on authentic connections, dr	riven by an online pla	atform that unites people, ignites shared experiences,
and empower	s individuals to contribute meaningfully t	to local and global pr	ogress.
	·		
ARTICLE IV	MANNER OF ELECTION The mo		ectors are elected and appointed: By majority vote.
Name and Title	le:	Name and Title	Carlos Ramirez, Director
Address	11422 Galleria Dr.	Address:	2103 W Carmen St.
	Tampa, Florida 33604		Tampa, Florida 33606
Name and Tit	Sabrina Griffith-Jackson, Director	Name and Title	Christic Hattersley, Director
Address	5435 Silver Charm Terrace	Address:	5833 Tulip Flower Dr.
	Wesley Chapel, Florida 33544		Riverview, Florida 33578
Name and Tit	le:	Name and Title	··
Address			
			

Name and Title:		Name and Title:	
Address _		Address:	
-			
-			
Name and Title:		Name and Title:	
Address		Address:	
_	1000 CO		
_			
ARTICLE VI	REGISTERED AGENT Forida street address (P.O. Box NOT acce	entable) of the projetered agent is:	
	Matthew Chernesky	public) of the registered agent is.	· · · · · ·
Name:	3809 W Oklahoma Ave		
Address:	Tampa, Florida 33616		
	·		. I
	INCORPORATOR		::7
The name and a	ddress of the Incorporator is: Matthew Chernesky		(3 (1)
Name:	· · · · · · · · · · · · · · · · · · ·		
Address:	3809 W Oklahoma Ave	<u></u>	
	Tampa, Florida 33616		
	<i>EFFECTIVE DATE:</i> 10/31/2023		
	other than the date of filing:		the filing.)
	inserted in this block does not meet the a tive date on the Department of State's rec	pplicable statutory filing requirements, this date will not be cords.	: listed as the
Having been na certificate, I am	med as registered agent to accept service familiar with and accept the appointment a	of process for the above stated corporation at the place of registered agent and agree to act in this capacity	designated in this
	MC	10/30/2023	
	Required Signature of Registered	l Agent Date	
	ument and affirm that the facts stated here of State constitutes a third degree felony as	in are true. I am aware that any false information submitted provided for in s.817.155, F.S.	l in a document to
	MCK	10/30/2023	
	Required Signature of Incor	rporator Date	