

N24000010143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

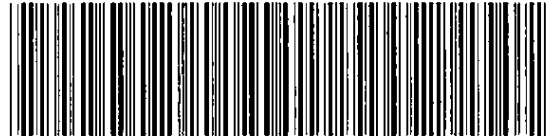
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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08/23/24--01021--025 **105.00

LLC into
non profit

Certificate of Conversion
For
"Other Business Entity"
Into
Florida 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. 607.1415, Florida Statutes.
Non Profit

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

Help From Our Heartz LLC

Enter Name of Other Business Entity

2. The "Other Business Entity" is a Limited Liability Company
(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 June 5th, 2023

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 ~~Profit~~ Corporation as set forth in the attached Articles of Incorporation:

Help From Our Heartz

Enter Name of Florida Profit Corporation
Non Profit

5. If not effective on the date of filing, enter the effective date: June 1st, 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.

FILED
JUN 23 AM 7:58
TALLAHASSEE, FLORIDA

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Help From Our Heartz, Inc

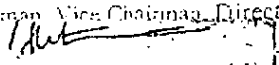
Enter Name of Florida ~~Profit~~ Corporation
Non Profit

5. If not effective on the date of filing, enter the effective date: 05/30/2024
(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.

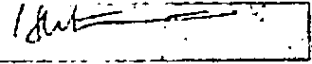
Signed this 24th day of August, 2024

Required Signature for Florida Profit Corporation:

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

Printed Name: Director
Signature ID: ZOFHN6HNT2

Required Signature(s) on behalf of Other Business Entity: (See below for required signature(s))

Signature: 

Printed Name: Director
Signature ID: ZOFHN6HNT2 Title: Director

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

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:

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

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

ARTICLE I NAME

The name of the corporation shall be: Help From Our Heartz, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailng address, if different is:

4907 University Drive, Unit 203

322 Palm Circle East

Lauderhill, Fl. 33351

Pembroke Pines, Fl 33025

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to provide financial education as a key cornerstone of middle-class success. HfoH aims at

ensuring that good financial principles are instilled at an early age and that the value of a

healthy lifestyle through sports, movement, and nature-based activities are embodied

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

Directors are appointed by the Board

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Hector Stevens, Director

Name and Title: Wayne Williams, Director

Address: 322 Palm Circle East

Address: 6425 NW 52nd Court

Pembroke Pines, Fl. 33025

Lauderhill, Fl 33319

Name and Title: Yvette Bernard, Director

Name and Title: Diedre Foster, Director

Address: 7 Westside Ave

Address: 8117 Evening Star Drive,

Nassau, Freeport, NY 11520,

Unit 327

Pasadena, MD, 21122

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Wayne Williams

Address: 4907 University Drive, Unit 203

Lauderhill, FL 33351

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Hector Stevens

Address: 322 Palm Circle East,

Pembroke Pines, FL 33025

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 5/30/2024 (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

[Signature]
Signature of Registered Agent

08/24/2024

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.

[Signature]
Signature of Incorporator

08/24/2024

Date