P14000100004

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
•
(Business Entity Name)
(,,
(Document Number)
(Boodine Nambol)
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COVER LETTER

4.9.7	Charter Section	•			
	Division of Corporations				
	3Chord,	. Inc.			
SUBJ	JECT:				
	Name of Result	lting Florids Profit Cornoration			
conve	· ·	Articles of Incorporation, and fees are submitted to a "Florida Profit Corporation" in accordance with			
Please	e return all correspondence concerni	ing this matter to:			
	Ismis Winter Jamie H	tunter			
	Contact Person				
	3Chord, LLC				
	Firm/Company				
3	465 Chastain Lakes Drive NW				
	Address				
K	Cennesaw, GA 30144				
	Onj, Sant and Dip Code				
ja	amie.hunter23@gmail.com				
E	-mail address: (to be used for future annual	l report notification)			
For fu	orther information concerning this m	natter, please call:			
	Jamie Hunter	305 965-4633 at ()			
	31				
Enclos	sed is a check for the following amo	ount:			
(1) (610)	and Certificate of Status	and Certified Copy Certified Copy, and Certificate of Status			
STRE	EET ADDRESS:	MAILING ADDRESS:			
	Filings Section	New Filings Section			
	on of Corporations	Division of Corporations			
	n Building	P. O. Box 6327			
2661 I	Evecutive Center Circle	Tallahaccee FI 22214			

Tallahassee, FL 32301

Certificate of Conversion

For

"Other Rusiness Entity"

Into

Florida Profit Corporation

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

3Chord, LLC	
Enter Name of Other Business Entity	
2. The "Other Business Entity" is a	14
(Entercentity type: Example: limited liability company, limited partnership, common law or business trust, etc.) Florida	जिंद्याम्, ह्य
first organized, formed or incorporated under the laws of	237
(Lifter state, or it a non-0.5, entity, the name of the country)	ي
• • • • • • • • • • • • • • • • • • • •	
November 18, 2011	
Enter date "Other Business Entity" was first organized, formed or incor 3. If the jurisdiction of the "Other Business Entity" was changed, the state or co	porated
Enter date "Other Business Entity" was first organized, formed or incor 3. If the jurisdiction of the "Other Business Entity" was changed, the state or co 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 Artic	porated ountry under
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 conthe laws of which it is now organized, formed or incorporated: 4. The name of the Florida Profit Corporation as set forth in the attached Artice Incorporation:	porated ountry under
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 conthe laws of which it is now organized, formed or incorporated: 4. The name of the Florida Profit Corporation as set forth in the attached Artice Incorporation:	porated ountry under
Enter date "Other Business Entity" was first organized, formed or incor 3. If the jurisdiction of the "Other Business Entity" was changed, the state or co 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 Artic	porated ountry under

Signed	this _	8	day of	December	, 20 <mark>_14</mark>
Requir	red Sig	onst	ure for Floria	la Profit Corpor	ation•
1104 111			414 101 1 1011	Ja rione Corpor	
Signati	ure of	Chai	rman, Vice C	hairman, Director	Officer, or, if Directors or Officers have not
been se	elected	an	Incorporator:	am	il ttimus
Printed	Name	.; 2:	Incorporator: Jamle Hunt	er /) Titl	efficer
			(
				If of Other Busin	ss Entity: [See below for required
signatu	re(s).]	_			•
			11/2 // X		
Signatu	ıre:		cott Hunter		Officar
Printed	Name	;	Cott i luntei		Title: Officer
Ciamatu					
Deintod	Nomes			D/2-	Title:
Printeu	Name.				Title:
Sionatu	re.				
Printed	Name:			-,,:	Title:
		-			
Signatu	re:			ينها والمراجعة والمراجع والمراجع والمراجعة والمراجعة والمراجع والمراجع والمراجع والمرا	
Printed	Name:				Title:
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Signatu					
Printed	Name:				Title:
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			eneral Partner	or Limited Liabi	ity Partnersnip:
Signatu	ic or o	ne O	eneral i aimei	•	
If Flori	da Lin	nited	Partnershin	or Limited Liahi	ity Limited Partnership:
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				rized Representativ	e.
All othe					
Signatiu	ie orai	ı auı	norizea persor	I.	
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Fees:	<i>σ</i> ι				#7.5 0.0
			of Conversion	•	\$35.00
				or incorporation:	\$70. 0 0
	Certifi				\$8.75 (Optional)
(Certifi	cate	of Status:		\$8.75 (Optional)

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I	NAME	3Chord, Inc.					
I ne name of the	e corporation shall be:				—		
ARTICLE II	PRINCIPAL OFFICE						
tt t							
	Principal street address			Mailing address, if differen	t is:		
14624 Dre	eam Catcher Court		3465	3465 Chastain Lakes Drive NW			
Clermont	, FL 34711		Kenn				
	PTIRPOSE or which the corporation is organ e skilled entertainers for		n, conven	tions, and other forms	14 DEC 15	では、一般には、一般には、一般には、一般には、一般には、一般には、一般には、一般に	
of public e	entertainment.				TE Tu		
					<u>عد</u> ب	-ري دي	
						CALVATIONS	
ARTICLE V Name and Title Address: Name and Title	INITIAL OFFICERS AN Scott Hunter, CEO 14624 Dream Catcher Clermont, FL 34711	Court Add	ne and Title:	Jamie Hunter, CFO 3465 Chastain Lakes [Kennesaw, GA 30144			
11001000.			-				
Name and Title	:	Nam	e and Title:				
Address:		Add	ress:				
Name:	REGISTERED AGEN Florida street address (P.O. Bo cott Hunter 4624 Dream Catcher Co lermont, FL 34711	x NOT acceptable)	of the regist	ered agent is:			

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jamie Hunter

manne.

3465 Chastain Lakes Drive N

Address:

Kennesaw, GA 30144

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/Registered Agent

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.

Required Signature/Incorporator

Date