

P15 0008 37270

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4-22-15

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: **Nexion Biosciences Inc**

Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

Clayton Clopton Yates III

Contact Person

Firm/Company

173 Roanoke Lane

Address

Auburn AL 36830

City, State and Zip Code

yateslab@gmail.com

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

For further information concerning this matter, please call:

Christopher Lopez at **(407) 309-2450**

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
and Certificate of
Status

☐ \$113.75 Filing Fees
and Certified Copy

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

STREET ADDRESS:

New Filings Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filings Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation

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. 607.1115, Florida Statutes.

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

Knight Investments 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 **July 3, 2006**

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:**

Nexion Biosciences Incorporated

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: **1 May 2015**
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; **AND** 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

Signed this 9th day of April, 2015.

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: Christopher Lopez

Title: Incorporator

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

Signature: _____

Printed Name: Christopher Lopez

Title: Manager

Signature: _____

Printed Name: Jayson Lopez

Title: Manager

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)

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TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be: Nexion Biosciences Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Principal street address

Mailing address, if different is:

7901 Kingspointe Parkway, Suite 8
Orlando, Florida 32819 USA

173 Roanoke Lane
Auburn AL 36830 USA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To conduct medical research and development on biotechnology
and biosciences that have a meaningful contribution to the well being
of patients; being applicable to major national distribution in the United
States of America & abroad.

ARTICLE IV SHARES

The number of shares of stock is: 6,500,000 Common Shares & 3,500,000 Preferred Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Clayton Clopton Yates III, President

Address: 173 Roanoke Lane
Auburn AL 36830

Name and Title: Christopher Lopez, Officer

Address: 3085 Sunset Lane
Cocoa, FL 32922

Name and Title: Windy Dean-Colomb, Director

Address: 120 Winderg Lane
Lafayette LA 70503

Name and Title: Jesse Michael Jaynes, Director

Address: 1583 Overhill Court
Auburn, AL 36830

Name and Title: Richard Blackmore, Director

Address: 221 W. Exchange, Suite 340
Fort Worth, TX 76106

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Christopher Lopez

Address: 3085 Sunset Lane
Cocoa, FL 32922

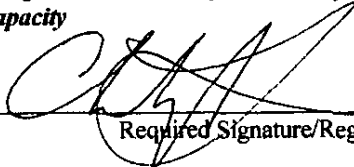
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ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Christopher Lopez
Address: 3085 Sunset Lane
Cocoa, FL 32922

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

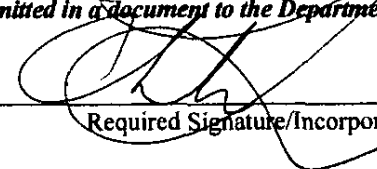


Required Signature/Registered Agent

16 Apr 15

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

16 Apr 15

Date