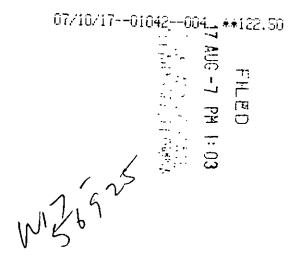
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| Certified Copies Certificates of Status | | | | | |
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| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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T. BURCH AUG 15 2017

COVER LETTER

| то: | Charter Section Division of Cor | | | | | |
|-----------------|--|--|------------------------------------|-------------------|--|-------------|
| CHDI | The Winnin | g Way, Corp. | | | | |
| SUBJ | EC1: | Name of | Resulting Florid | a Profit | Corporation | |
| | | e of Conversion, Articles Profit Corporation" in ac | | | ees are submitted to convert an "Oth 15, F.S. | er Business |
| Please | return all corresp | ondence concerning this | s matter to: | | | |
| Kim P | ilcher | | | | | |
| | | Contact Person | _ | | | |
| The W | inning Way, Corp. | | | | | |
| | · · · · · · · · · · · · · · · · · · · | Firm/Company | | _ | | |
| P.O. B | ox 402 | | | _ | | |
| | | Address | | | | |
| Panam | ia City, FL 32444 | | | _ | | |
| | • | City, State and Zip Cod | e | | | |
| kim.th | ewinningway@gm | ail.com | | | | |
| | E-mail address: (t | o be used for future anni | ual report notific | ation) | | |
| For fu | rther information | concerning this matter, | please call: | | | |
| Kim P | ilcher | | 850 _at (| 381-42) | 216 | |
| | Name of Co | ontact Person | Area C | Code and | Daytime Telephone Number | |
| Enclo | sed is a check for | the following amount: | | | | |
| = \$10 | 05.00 Filing Fees | □\$113.75 Filing Fees and Certificate of Status | □\$113.75 Filin and Certified C | | ■\$122.50 Filing Fees, Certified Copy, and Certificate of Status | |
| New I Divisi | ET ADDRESS: Filings Section on of Corporation in Building | ns | | New F Division | ING ADDRESS: illings Section on of Corporations Box 6327 | |

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 11, 2017

KIM PILCHER PO BOX 402 PANAMA CITY, FL 32444

SUBJECT: THE WINNING WAY, LLC

Ref. Number: W17000056925

We have received your document for THE WINNING WAY, LLC and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

The document must be signed by a chairman, vice chairman, director, officer, or an incorporator, if directors or officers have not been selected.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch Regulatory Specialist III

Letter Number: 717A00013925

17 AUG -7 PH 3: 08

Condeted

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

| ARTICLE II PRINCIPAL OFFICE Principal street address | | | Mailing address, if different is: | | | |
|--|--|--|--|--|--|--|
| 1511 Country Club Dri | ve | P.O. Box | 402 | | | |
| Lynn Haven, FL 32444 | | Panama (| Panama City, FL 32402 | | | |
| | the corporation is organized is: | | organzations build high performance | | | |
| | | · · · · · · · · · · · · · · · · · · · | imunication, conflict management, and | | | |
| risk reduction strategies | S. | | | | | |
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| | | | 7 AU | | | |
| | | | | | | |
| ARTICLE IV SHAR The number of shares of | R <u>ES</u> 1000 f stock is: | | PH 1:0 | | | |
| | | | | | | |
| ARTICLE V INITIA | AL OFFICERS AND/OR DIRECTO | PRS | egen . E | | | |
| ARTICLE V INITIA | AL OFFICERS AND/OR DIRECTO Let Experiment the second secon | | John E. Pilcher, III, Vice President | | | |
| ARTICLE V INITIA | AL OFFICERS AND/OR DIRECTO Let: P.O. Box 402 | | John E. Pilcher, III, Vice President P.O. Box 15247 | | | |
| ARTICLE V INITL | AL OFFICERS AND/OR DIRECTO Let Experiment the second secon | Name and Title | John E. Pilcher, III, Vice President | | | |
| ARTICLE V INITE Name and Tith Address | AL OFFICERS AND/OR DIRECTO te: P.O. Box 402 Panama City, FL 32402 | Name and Title Address: | P.O. Box 15247 Panama City, FL 32406 | | | |
| ARTICLE V INITE Name and Tith Address | AL OFFICERS AND/OR DIRECTO E: P.O. Box 402 Panama City, FL 32402 | Name and Title Address: Name and Title | P.O. Box 15247 Panama City, FL 32406 | | | |
| ARTICLE V INITE Name and Tith Address | AL OFFICERS AND/OR DIRECTO te: P.O. Box 402 Panama City, FL 32402 | Name and Title Address: Name and Title | P.O. Box 15247 Panama City, FL 32406 | | | |
| ARTICLE V INITE Name and Title Address Name and Title | AL OFFICERS AND/OR DIRECTO te: P.O. Box 402 Panama City, FL 32402 | Name and Title Address: Name and Title Address: Address: | P.O. Box 15247 Panama City, FL 32406 | | | |
| Name and Title Address Name and Title Address | AL OFFICERS AND/OR DIRECTO EE: P.O. Box 402 Panama City, FL 32402 | Name and Title Address: Name and Title Address: Address: | John E. Pilcher, III, Vice President P.O. Box 15247 Panama City, FL 32406 | | | |
| Name and Title Address Name and Title Address | AL OFFICERS AND/OR DIRECTO EE: P.O. Box 402 Panama City, FL 32402 | Name and Title Address: Name and Title Address: Name and Title | John E. Pilcher, III, Vice President P.O. Box 15247 | | | |

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: | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| The Winning Way, LLC | | | | | | | | | |
| Enter Name of Other Business Entity | | | | | | | | | |
| 2. The "Other Business lintity" 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 | | | | | | | | | |
| (Enter state, or if a non-U.S. entity, the name of the country) | | | | | | | | | |
| $_{\rm cm}^{2015}$ $9-22-2015$ | | | | | | | | | |
| on 2015 | | | | | | | | | |
| organized, formed or incorporated: 4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation: | | | | | | | | | |
| The Winning Way, Corperation | | | | | | | | | |
| Enter Name of Florida Profit Corporation | | | | | | | | | |
| 5. If not effective on the date of filing, enter the effective date: (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.) 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 2 day of July | . 20 17 | |
|-------------------------------|---|--|-----------------|
| Requii | red Signature for Florida Profit Corporation | <u>ı:</u> | |
| Signatu Incorpo Printed | orator: Name: Kim P. Ger Title: President | icer, or, if Directors or Officers have not bec | en selected, an |
| Requir | red Signature(s) on behalf of Other Business | Entity: [See below for required signature(| s).] |
| Signatu | ire: Kim Bilahar | | _ |
| Printed | Name: Kim Pilcher | Title: President | _ |
| Signati | ure: | | _ |
| Printed | Name: | Title: | - |
| Signati | ure: | | _ |
| Printed | l Name: | Title: | _ |
| Signati | ıre: | | _ |
| Printed | l Name: | Title: | _ |
| Signati | ure: | | _ |
| Printed | Name: | Title: | _ |
| Signati | ure: | | _ |
| Printed | l Name: | Title: | _ |
| | ida General Partnership or Limited Liabilit ure of one General Partner. | | |
| | rida Limited Partnership or Limited Liabilitures of ALL General Partners. | y Limited Partnership: | |
| If Flor Signati | rida Limited Liability Company: ure of a Member or Authorized Representative. | | |
| All oth Signati | ners: ure 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) | |

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: John E Pilcher, III Name: 1717 Frankford Avenue Address: Panama City, FL 32405 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Kim Pilcher Name: 1511 Country Club Drive Address: Lynn Haven, FL 32444 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 July 2, 2017 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. July 2, 2017 Required signature/Incorporator Date

ARTICLE VI REGISTERED AGENT