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COVER LETTER

TO:	Charter Section Division of Cor		_	
SUBJ	ECT:	Koyal Ou Name of	1Ster Comp Resulting Florida Profit	On y Corporation
		e of Conversion, Articles Profit Corporation" in ac	•	ees are submitted to convert an "Other Business 15, F.S.
Please	return all corresp	ondence concerning this	s matter to:	
_/	Alicia	Peel		
		Contact Person		
	Royal	Oyster Con Wmm/Company	npany_	
	71 Con	nie Dr Address		
C	rawford	ville, FL City, State and Zip Code	32327	
	Oyal O	4 Ster Compe be used for future annu	an 4 65Ma!	1. Com
For tu	rther information	concerning this matter,	please call: _at (19-2551
-4-3	Name of Co	ontact Person	Area Code and	Daytime Telephone Number
Enclos	sed is a check for	the following amount:		
S \$10	05.00 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
New I Divisi Clifto	ET ADDRESS: Filings Section on of Corporation In Building Executive Center		New F Division P. O. I	ING ADDRESS: illings Section on of Corporations Box 6327 assee, FL 32314

Tallahassee, FL 32301

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 Co	nversior	ı is:	
Royal Oyster LLC Enter Name of Other Business Entity			
Enter Name of Other Business Entity	_,		
2. The "Other Business Entity" is a 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			
on 2-7-18 Enter date "Other Business Entity" was first organized, formed or incorporate	ed		
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the law organized, formed or incorporated:	vs of whi	ch it is	onow
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> Royal Syster Company Enter Name of Florida Profit Corporation	_		
5. If not effective on the date of filing, enter the effective date: \(\frac{7}{20}\)/\(\frac{8}{2}\). (The effective date: Cannot be prior to nor more than 90 days after the date this document is Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the listed as the document's effective date on the Department of State's records.			
Page 1 of 2	SEURETARY OF	2010 FEB 2 1	FIL
	E 73	至	ED

Signed this 20th day of February	g 20 <u>18</u>					
Required Signature for Florida Profit Corporation:						
Signature of Chairman, Vice Chairman, Director, Office Incorporator: Chairman, Director, Office Incorporator:	er, or, if Directors or Officers have not been selected, an					
Required Signature(s) on behalf of Other Business E	ntity: [See below for required signature(s).]					
Signature: (live) 191						
Printed Name: AliciA Reel	Title: Prosident/chairme					
Signature:						
Printed Name:	_ Title:					
Signature:						
Printed Name:	Title:					
Signature:						
Printed Name:	_ Title:					
Signature:						
Printed Name:						
Signature:	<u> </u>					
Printed Name:	_ Title:					
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.						
If Florida Limited Partnership or Limited Liability I Signatures of <u>ALL</u> General Partners.	<u>limited Partnership:</u>					
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)					

Page 2 of 2

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

Principal street address Principal street address On the principal street address	Mailing address, if different is:
7) Connie D	Mailing address, if different is:
7) Connie D	withing address, it different is:
C A 1 11 C 3 3 3	
Crawfordville, FL 32327	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is: Aquaculture, Aquaculture (Equiptment Manufacturity/Devi	Consulting, Aquaculture
240,61,1000	
	<u></u>
ARTICLE IV SHARES	
The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECT	
Name and Title: Alicia Peel/Presiden	ame and Title:
	ddress:
Crowfordville, FL 3232	
Name and Title:N	ame and Title:
Address: A	ddress:
Name and Title:N	ame and Title:
Address: A	ddress:

ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptab	le) of the registered agent is:
Name: Alicia Peel	
Address: 71 Connie Dr	
Crawford ville, fl 32327	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
The maine and address of the meorporator is.	
Name: Alicia Peel	
Address: 71 Connic Dr	
Crawfordville, FL 32327	
***************************************	*******
Having been named as registered agent to accept service of pro- this certificate, I am familiar with and accept the appointment a	
aline Feel	2-20-2018 Date
Required Signature/Registered Agent	Date
I submit this document and affirm that the facts stated herein of	
document to the Department of State constitutes a third degree j	elony as provided for in s.817.155, F.S.
aline Peel	2-20-2018 Date
Required Signature/Incorporator	Date