

PI8000030331

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

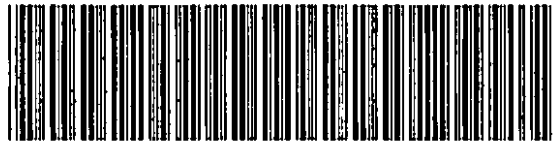
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Silent Rogue, 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:

Mandie Wright

Contact Person

Catchfire Funding

Firm/Company

19751 E Mainstreet, Suite 360

Address

Parker, CO 80138

City, State and Zip Code

mandie@catchfirefunding.com

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

For further information concerning this matter, please call:

James B. Lewis

at (813) 410-1499

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 ☐ \$113.75 Filing Fees ☐ \$122.50 Filing Fees,
and Certificate of and Certified Copy Certified Copy, and
Status 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:

Silent Rogue LLC

117-246351

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 12/1/2017

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:

Florida

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation**:

Silent Rogue, Inc.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: _____

(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.

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18 MAR 29 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signed this 23rd day of March, 2018.

Required Signature for Florida Profit Corporation:

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

Incorporator: William R. Seagraves

Printed Name: William R. Seagraves Title: Incorporator

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

Signature: James B. Lewis

Printed Name: James B. Lewis Title: Member

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)

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18 MAR 29 AM 8:57
SHERIFF'S OFFICE
HALL COUNTY, FLORIDA

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: Silent Rogue, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

11608 Fox Creek Drive

Tampa, FL 33635

Mailing address, if different is:

4532 W Kennedy Blvd Unit 433

Tampa, FL 33609

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful purposes

ARTICLE IV SHARES

The number of shares of stock is: 500,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: James B. Lewis, Director

Address: 11608 Fox Creek Drive

Tampa, FL 33635

Name and Title: James B. Lewis, President

Address: 11608 Fox Creek Drive

Tampa, FL 33635

Name and Title: James B. Lewis, Secretary

Address: 11608 Fox Creek Drive

Tampa, FL 33635

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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TAMPA, FL 33601

ARTICLE VI REGISTERED AGENT

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

Name: James B. Lewis
Address: 11608 Fox Creek Drive
Tampa, FL 33635

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: William R. Seagraves
Address: 19751 E Mainstreet, Ste 360
Parker CO 80138

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

James B. Lewis
Required Signature/Registered Agent

March 23, 2018
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.

William R. Seagraves
Required Signature Incorporator

3/26/2018
Date

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18 MAR 29 AM 8:57
TAMPA, FLORIDA
STATE DEPARTMENT OF REVENUE