(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #	9
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name)
(Document Number)		
Certified Copies	Certificates o	of Status
Special Instructions to Filing Officer:		
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Office Use Only



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COVER LETTER

10:	Division of Co					
SUBJE	CT: TRIFECTA	CREATIVE COLLECTIV	E, CORP.			
30232		Name of	Resulting Flori	da Profit	Corporation	
		e of Conversion, Article Profit Corporation" in ac			ees are submitted to convert an "Other Busin 15, F.S.	ess
Please	return all corresp	oondence concerning this	s matter to:			
ЕММА	NUEL TRENCH	E				
•		Contact Person				
TRIFEC	CTA CREATIVE	COLLECTIVE				
		Firm/Company	- 			
901 PR	OGRESSO DRIV	E, SUITE 206				
		Address				
FORT L	AUDERĐALE, I	<u> </u>				
		City, State and Zip Code	e			
ACCOL	JNTING@WEAF	RETRIFECTA.COM				
E-	-mail address: (t	o be used for future annu	ual report notifi	cation)		
For furt	her information	concerning this matter,	please call:			
EMMA.	NUEL TRENCHI	E	305 at (469-1	704	
	Name of Co	ontact Person		Code and	Daytime Telephone Number	
Enclose	ed is a check for	the following amount:				
□ \$105	5.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Fil and Certified		■\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
New Fi Division Clifton 2661 Ex	ET ADDRESS: lings Section n of Corporation Building secutive Center ssee, FL 32301			New F Division P. O. E	ING ADDRESS: illings Section on of Corporations Box 6327 assec, FL 32314	

Certificate of Conversion

For

"Other Business 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.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
TRIFECTA CREATIVE COLLECTIVE LLC LIS-12083
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
(Enter state, or if a non-U.S. entity, the name of the country)
01/21/2015 on
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:
TRIFECTA CREATIVE COLLECTIVE, CORP.
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.

Page 1 of 2



Signed	thisday of	, 20	
<u>Requi</u>	red Signature for Florida Profit Corporation	<u>1:</u>	
Signat Incorp Printed	ure of Chairman, Vice Chairman, Director, Off orator: <u>Afmado R. Tanche</u> d Name: <u>EMMANUEL TRENCHE</u> Title: <u>PRES</u>	icer, or, if Directors or Officers have not be	en selected, an
<u>Requi</u>	red Signature(s) on behalf of Other Business	Entity: [See below for required signature(
Signat	ure:		_
Printed	ure: JOEL WILCOXSON	Title: VP, CREATIVE SERVICES	_
Signat	ure:		_
Printe	d Name: HUGO TABARES	Title: VP, PRODUCTION	_
Signat	d Name: HUGO TABARES ure:		_
	d Name:		
Signat	ure:		_
Printe	d Name:	Title:	_
Signat	ure:		_
Printe	d Name:	Title:	_
Signat	ure:		
Printe	d Name:	Title:	18
	rida General Partnership or Limited Liabilit ure of one General Partner.	y Partnership:	JUN-8
	rida Limited Partnership or Limited Liabilit ures of <u>ALL</u> General Partners.	y Limited Partnership:	AM 10: 20 OF STATE E. FLORIDA
	rida Limited Liability Company: ure of a Member or Authorized Representative.		: 20 RIDA
All otl Signat	hers: 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)	

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

ARTICLE I NAME TRIFECTA CREATIV	E COLLECTIVE, CORP.
The name of the corporation shall be:	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address 901 PROGRESSO DRIVE	Mailing address, if different is:
SUITE 206	
FORT LAUDERDALE, FL 33304	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: VIDEO PRODUCTION AND MARKETING SERVICES	
	SECNE JUN -
	—————————————————————————————————————
	OF ST
-	
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIR	
Name and Title HUGO TABARES, VICE PRESIDENT	JOEL WILCOXSON, VICE PRESIDENT Name and Title:
Address: 8365 SW 42ND CT.	Address: 21535 CAVANDISH RD
DAVIE, FL 33328	BOCA RATON, FL 33433
Name and Title:	Name and Title:
Address: 575 NE 5TH TERRACE #740	Address:
FORT LAUDERDALE, FL 33301	
Name and Title:	Name and Title:
Address:	Address:

	E VI REGISTERED AGENT		
The <u>name</u>	e and Florida street address (P.O. Box NOT accept	able) of the registered agent is:	
Name:	HUGO TABARES		
Address:	8365 SW 42ND COURT		
	DAVIE, FL 33328		
ARTICL			
The <u>name</u>	and address of the Incorporator is:		
Name:	EMMANUEL TRENCHE		
Address:	575 NE 5TH TERRACE, APT 740		
	FORT LAUDERDALE, FL 33304		
this certifi	Required Signature Registered Agent	t as registered agent and agree to act in this capacity 6/4/2018 Date n are true. I am aware that any false information sure felony as provided for in s.817.155, F.S. 6/4/2018 Date	v
	ı	Ð	

FILED

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SEURE JARY OF STATE
FALL AHASSEE, FLORIDA