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(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nai	me)
(Do	cument Number))
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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Tallahassee, FL 32301

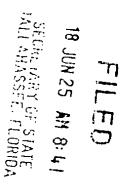
TO:	Charter Section Division of Cor					
CIIDI	Evie Courtla	indt, Inc.				
3013	EC1	Name of	Resulting	Florida Profit	Corporation	
		e of Conversion, Article: Profit Corporation" in ac			ees are submitted to convert an "Othe 15, F.S.	r Business
Please	return all corresp	ondence concerning this	s matter to	:		
Carme	l Legault					
-		Contact Person				
Evie C	ourtlandt, Inc.					
		Firm/Company	<u> </u>	-11		
5301 N	NW 2nd Avenue, A	pt PH B				
	 :	Address				
Воса I	Raton, FL 33487					
-1	- 1= - 1	City, State and Zip Code	e e			
	eviecourtlandt.com					
	E-mail address: (t	o be used for future annu	ual report i	notification)		
For fu	other information	concerning this matter.	please call	:		
Carme	ो दिह्ना		917	573-7)	9.38	
	Name of Co	ontact Person		Area Code an	d 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		75 Filing Fees ified Copy	S122.50 Filing Fees, Certified Copy, and Certificate of Status	
	ET ADDRESS:				ING ADDRESS:	
	Filings Section				filings Section	
	ion of Corporation	16			on of Corporations	
	n Building Executive Center	Circle			Box 6327 ussee, FL 32314	
2001 J	こうないいく しいばい	CIRCIC		। सम्बद्धा	MASCE, II. DZDIY	

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.

Evie Courtlandt, Inc.	(FEIN: 320531201)
Enter Name of Other Business Entity	
2. The "Other Business Entity" is a	
(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)	
April 28, 2017 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 organized, formed or incorporated:	of which it is now
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation	<u>:</u>
Evie Courtlandt, 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 find Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this listed as the document's effective date on the Department of State's records.	-
Page 1 of 2	•

Page 1 of 2



Signed this 20th day of June	. 20	
Required Signature for Florida Profit Corporati		
Signature of Chairman, Vice Chairman Director, Clarector, Clarector, Clarector, Chairman, Director, Chairman, Chairm		x been selected, an
Incorporator: Printed Name: Carmel Legault Title: Printed Name: Carmel Legault	incipal/Owner/President	
Required Signature(s) on behalf of Other Busine	ess Entity: (See below for required signa	nne(s) l
		•
Signature:		
Printed Name: Carmel Legault	Title: Principal/Owner/President	<u>!</u>
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 Liabi Signature of one General Partner.	ility Partnership:	18 JUI SLORE ALL AH
If Florida Limited Partnership or Limited Liabi	lity Limited Partnership:	ASSA
Signatures of ALL General Partners.		5. T
If Florida Limited Liability Company:		
Signature of a Member or Authorized Representativ	se.	D SIATE LORID
6 D - 46		
All others: Signature of an authorized person.		44
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)	

Page 2 of 2

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

The name of the corporation shall be:	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
5301 NW 2nd Avenue, Apt PH B	
Boca Raton, FL 33487	
The purpose for which the corporation is organized is:	
To write, sell, market, tour, and blog to promote books and other	writings, and for speaking engagements and
other related activities.	
	Ā.
ARTICLE IV SHARES 1.500	
	¥ R C T T
ARTICLE V INITIAL OFFICERS AND/OR DIRI	· · · · · · · · · · · · · · · · · · ·
Carmel Legant President/Director/Principal	
Name and Title:	Name and Title:
Address: 5301 NW 2nd Avenue, Apt PH B	Address:
Boca Raton, FL 33487	Can A
Name and Title:	Name and Title:
Training and Training	
Address:	Address:
Name and Title:	Name and Title:
Address:	Address:

The name	and Florida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Carmel Legault		
Address:	5301 NW 2nd Avenue, PH B		
	Boca Raton, FL 33487		
ARTICL	E VII INCORPORATOR		
The name	and address of the Incorporator is:		
Name:	Carmel Legault		
Address:	5301 NW 2nd Avenue, PH B		
	Boca Raton, FL 33487		
*******	***********	**************************************	
	ren named as registered agent to accept service of proces icate, I am familiar with and accept the appointment as r		Si gnara a
		June 20, 2018	
	Required Signature/Registered Agent	Date	
I submit t	his document and affirm that the facts stated herein are	true. I am aware that any false information sub	mitted in
document	to the Department of State constitutes a third degree feld	ny as provided for in s.817.155, F.S.	
	\sim 0 \mathcal{Q}		
		hmc 20 2018	

ARTICLE VI REGISTERED AGENT

Required Signature/Incorporator

FILED

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SECHETARY OF STATE
FALL AHASSEE, FLORIDA

Date