

P190000020361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

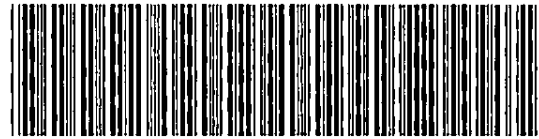
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COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Exclusive Group Holdings, 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:

Mary Todd

Contact Person

Exclusive Group Holdings Inc.

Firm/Company

780 Fifth Ave. S, Suite 200

Address

Naples, Florida 34102

City, State and Zip Code

Mary.Todd@ExclusiveGroupHoldings.com

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

For further information concerning this matter, please call:

Mary Todd

at (239) 307-8877

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> \$105.00 Filing Fees | <input type="checkbox"/> \$113.75 Filing Fees
and Certificate of
Status | <input type="checkbox"/> \$113.75 Filing Fees
and Certified Copy | <input checked="" type="checkbox"/> \$122.50 Filing Fees,
Certified Copy, and
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:

Exclusive Group Holdings LLC

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 Delaware
(Enter state, or if a non-U.S. entity, the name of the country)

on February 20, 2018

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:

N/A

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

Exclusive Group Holdings 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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Signed this 27 day of February, 2019.

Required Signature for Florida Profit Corporation:

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

Printed Name: Mary Todd Title: Officer

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

Signature: [Redacted]

Printed Name: Charles Mark Weir Title: Member

Signature: Mary E. Todd

Printed Name: Mary E. Todd Title: Member

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)

STATE OF FLORIDA
DIVISION OF REVENUE
19 MAR -4 PM 12:23
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

Exclusive Group Holdings Inc.

The name of the corporation shall be: Exclusive Group Holdings Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

Principal street address

Mailing address, if different is:

780 Fifth Ave. S., Suite 200

Naples, FL 34102

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

for any and all lawful purpose.

ARTICLE IV SHARES

1000 Class A Voting Shares; 1000 Class B Nonvoting Shares

The number of shares of stock is: _____ 1000 Class A Voting Shares; 1000 Class B Nonvoting Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: C. Mark Weir, Director

Name and Title: Mary E. Todd, Director

Address: 780 Fifth Ave. S., Suite 200

Address: 780 Fifth Ave. S., Suite 200

Naples, FL 34102

Naples, FL 34102

Name and Title:

Name and Title: _____

Address:

Address:

Name and Title:

Name and Title: _____

Address:

Address:

ARTICLE VI REGISTERED AGENT

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

Name: Adolos LLC
Address: 2117 Modena Ct.
Naples, FL 34105

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Mary Todd
Address: 2117 Modena Ct.
Naples, FL 34105

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

Mary Todd

Required Signature/Registered Agent

2/27/19

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.

Mary Todd

Required Signature/Incorporator

2/27/19

Date

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