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(Req	uestor's Name)	
(Add	ress)	
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(City/	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	

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#### COVER LETTER

TO:	Charter Section Division of Corporations				
SUBJ	White Rock Management Group, Inc.				
3000		f Resulting Florida	Profit (	Corporation	
	nclosed Certificate of Conversion, Article "into a "Florida Profit Corporation" in a				Other Business
Please	return all correspondence concerning th	is matter to:			
Amano	da Phillips				
	Contact Person				
	Firm/Company				
3225 N	AcLeod Drive, Suite 100				
	Address				
Las Ve	egas, Nevada 89121				
	City, State and Zip Coo	de			
ra@an	dersonadvisors.com				
- 1	E-mail address: (to be used for future and	nual report notificat	ion)		
For fu	rther information concerning this matter.	, please call:			
Amano	da Phillips	at ( 800	706-47	741	
	Name of Contact Person		de and	Daytime Telephone Number	
Enclos	sed is a check for the following amount:				
<b>□ \$</b> 10	5.00 Filing Fees \$\square\$113.75 Filing Fees and Certificate of Status	and Certified Cop		☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
New F	ET ADDRESS: Cilings Section on of Corporations	1	New F	ING ADDRESS: illings Section on of Corporations	

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Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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:
White Rock Management Group, Inc.
Enter Name of Other Business Entity
2. The "Other Business Entity" is a Corporation
(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
04/22/2015
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:
White Rock Management Group, 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 Florid 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 this /8 day of MARCH	, 20 19		
Required Signature for Florida Profit Corporation:			
Signature of Chairman, Vice Chairman, Director, Office Incorporator:  Printed Name: Gregg Landis  Title: Pres/VI		lected, an	
Required Signature(s) on behalf of Other Business I	Entity: [See below for required signature(s).]		
Signature:			
Printed Name: Gregg Landis	Pres/VP/Treas/Sec/DirTitle:		
Signature:			
Printed Name:	Title:		
Signature:			
Printed Name:	Title:		
Signature:			
Printed Name:			
Signature:	<u> </u>		
Printed Name:	Title:		
Signature:			
Printed Name:	Title:		
If Florida General Partnership or Limited Liability Signature of one General Partner.	Partnership:		
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	Limited Partnership:		19
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		A	APR 30
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		 <u>ట</u>

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## 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 3225 McLeod Drive, Suite 100  Las Vegas, Nevada 89121  ARTICLE III PURPOSE The purpose for which the corporation is organized is:  Capital Development, Asset Management	
The principal place of business/mailing address is:  Principal street address  Mailing address, if different is:  3225 McLeod Drive, Suite 100  Las Vegas, Nevada 89121  ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	
2225 McLeod Drive, Suite 100  Las Vegas, Nevada 89121  ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	_
The purpose for which the corporation is organized is:	_
	-
9	_
ARTICLE IV SHARES 1000	
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ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS  Gregg Landis - P/VP/I/S/D	D
Name and Title: Name and Title: 3225 McLeod Drive, Suite 100	
Las Vegas, Nevada 89121	
Name and Title: Name and Title:	-
Address: Address:	_
Name and Title: Name and Title:	_
Address: Address:	-

D

	E VI REGISTERED AGENT		
The name	e and Florida street address (P.O. Box NOT acceptab	le) of the registered agent is:	
Name:	Anderson Registered Agents, Inc.		
Address:	1000 N Washington Blvd.		
	Sarasota, Florida 34236		
<u>ARTICL</u>	E VII INCORPORATOR		
The name	e and address of the Incorporator is:		
Name:	Amanda Phillips		
Address:	3225 McLeod Drive, Suite 100		
	Las Vegas, Nevada 89121		
	een named as registered agent to accept service of prolicate, I am familiar with and accept the appointment a	******************************* cess for the above stated corporation at the place designs registered agent and agree to act in this capacity	nated in
		04/24/2019	
	Required Signature/Registered Agent	Date	
	this document and affirm that the facts stated herein to the Department of State constitutes a third degree	are true. I am aware that any false information submi felony as provided for in s.817.155, F.S.	itted in a
	Omarda Phillips	04/24/2019	
	Required Signature/Incorporator	Date	