Proposing

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	•
(City	/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	ne)
(Doc	ument Number)	
Certified Copies	·Certificates	of Status
Special Instructions to F	iling Officer:	-

Office Use Only



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TAUL/MASSEE, FL

2019 SEP -3 AM 8: 53

COVER LETTER

TO:	Charter Section Division of Corpo	orations				
(74 FF) B	Brown Financi	ial Group Inc.				
SUBJ	EC1:	Name of R	esulting F	Torida Pr	ofit Co	orporation
The en	nclosed Certificate o " into a "Florida Pro	of Conversion, Articles of the Corporation of the Articles of the Corporation of the Corp	of Incorportance w	oration, a with s. 60	ind fees 7.1115.	are submitted to convert an "Other Business, F.S.
Please	e return all correspo	ndence concerning this	matter to:	:		
Nicho	olas Clark					
		Contact Person				
Stroji	ny Financial Services					
		Firm/Company				
2598	Pass Road Suite F					
		Address				
Bilo	xi, MS 39531		<u> </u>			
	(City. State and Zip Code	:			
nelai	rk@strojnycorp.net					
	E-mail address: (to	be used for future annu	al report	notificati	ion)	
For	further information	concerning this matter, p	please cal	H:		
Nich	iolas Clark		_at (388-65)	96 Daytime Telephone Number
	Name of Co	ntact Person		Area Co	de and	Daytime Telephone Number
Enc	losed is a check for	the following amount:				
= \$	105.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status		.75 Filing rtified Co		☐\$122.50 Filing Fees. Certified Copy, and Certificate of Status
Nev Div Clit 266	REET ADDRESS: w Filings Section vision of Corporation from Building of Executive Center lahassee, FL 32301	Circle			New F Division P. O. E	ING ADDRESS: illings Section on of Corporations Box 6327 assee, FL 32314



August 14, 2019

NICHOLAS CLARK 2598 PASS RD STE F BILOXI, MS 39531

SUBJECT: BROWN FINANCIAL GROUP INC.

Ref. Number: W19000075084

We have received your document for BROWN FINANCIAL GROUP INC. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Certificate of Conversion must be signed by an authorized person.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 319A00016730

2019 SE? -3 AH II: 33

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:
Brown Financial Group Inc.
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)
July 13, 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 of which it is now organized, formed or incorporated:
<u></u>
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
Brown Financial Group Inc.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: 4/24/2019. (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

2019 SEP -3 AM 8: 53
SECREPARE OF STATE

Signed this 24 day of July		, 20 <mark></mark> .	
Required Signature for Florida Pr	ofit Corporation:		
Signature of Chairman, Vige Chairm Incorporator: 4 A SO Printed Name: Joshua Brown	y		been selected, an
Required Signature(s) on behalf of	Other Business Entity: [See below for required signatu	re(s).]
Signature: Josh Brown	<u> </u>		
Printed Name: <u>Joshua</u> Bro	W۸ Title:	Chief Executive Offic	<u>v</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 Signature of one General Partner.	Limited Liability Partner	rship:	
If Florida Limited Partnership or Signatures of ALL General Partners		1 Partnership:	
If Florida Limited Liability Comp Signature of a Member or Authorize			
All others: Signature of an authorized person.			
Fees: Certificate of Conversion: Fees for Florida Articles of Certified Copy: Certificate of Status:	\$8.75		

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: Brown Financial Grou	p Inc.
ARTICLE II PRINCIPAL OFFICE	
he principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
acksonville, FL 32246	
···	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
To provide financial services to clients.	
To provide infancial scrivices to chems.	
· · · · · ·	
.	
ARTICLE IV SHARES	
The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIS	PPCTOPS
	<u> </u>
Name and Title: Joshua Brown - Chief Executive Officer	Name and Title:
3007 Danube Ct	
Address:	Address:
Jacksonville, FL 32246	
Name and Title:	Name and Title:
Address:	Address:
	•
	· · · · · · · · · · · · · · · · · · ·
Name and Title:	Name and Title:
Address:	A 1.1
	Address:
	Address:

e name	E VI REGISTERED AGENT and Florida street address (P.O. Box NOT accept	able) of the registered agent is:
me:	Joshua Brown	
dress:	3007 Danube Ct	
aress.	Jacksonville, FL 32246	
RTICL	E VII INCORPORATOR	
	and address of the Incorporator is: Joshua Brown	
ame:	3007 Danube Ct	
idress:	Jacksonville, FL 32246	
	Jackson Villet I B 322 10	
****** aving b is certif	**************************************	**************************************
****** uving b is certif	**************************************	**************************************
is certif	een named as registered agent to accept service of ficate, I am familiar with and accept the appointment of	July 24, 2019 Date In are true. I am aware that any false information submitted in a

.

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