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| (Re | equestor's Name) | | | |
|---|--------------------|-------------|--|--|
| (Ac | idress) | | | |
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| (Ac | ddress) | | | |
| (Ci | ty/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Be | usiness Entity Nan | ne) | | |
| (Dx | ocument Number) | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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COVER LETTER

| Division of Corporations |
|--|
| SUBJECT: MONEY IS EVENTS INC |
| Name of Resulting Florida Profit Corporation |
| The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S. |
| Please return all correspondence concerning this matter to: |
| RAVENNA MAER |
| Contact Person |
| IRA FINANCIAL GROUP |
| Firm/Company |
| 1691 MICHIGAN AVE, STE. 415 |
| Address |
| MIAMI BEACH, FL 33139 |
| City, State and Zip Code |
| LLC@IRAFINANCIALGROUP.COM |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| RAVENNA MAER at (305) 330-4420 |
| Name of Contact Person Area Code and Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| □ \$105.00 Filing Fees □\$113.75 Filing Fees and Certificate of Status □\$122.50 Filing Fees, Certified Copy Certificate of Status |
| Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 A Place return the filed Tallahassee, FL 32303 A Place return the filed Tallahassee, FL 32303 A place return the filed Tallahassee, FL 32303 |

Articles of Conversion For Converting Eligible Entity Into Florida Profit Corporation

The Articles of Conversion and attached Articles of Incorporation are submitted to convert the following eligible business entity into a Florida Profit Corporation in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

| 1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is: MONEY IS EVENTS LLC | |
|---|--|
| Enter Name of the Converting Entity | |
| 2. The converting 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 ofFLORIDA | |
| (Enter state, or if a non-U.S. entity, the name of the country) | |
| onJANUARY 15, 2020 | |
| Enter date "Converting Entity" was first organized, formed or incorporated. | |
| 3. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation: MONEY IS EVENTS INC | |
| Enter Name of Plorida Profit Corporation | |
| This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction. | |
| 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 Flo Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not | |
| listed as the document's effective date on the Department of State's records. | |

| Signed this | 12th | day of _ | FEBRUARY | | , 20 20 | <u> </u> | | |
|---|--|--------------|---------------------|-----------------------|---------------|---------------|------------|----|
| Required Sl | Required Signature for Florida Profit Corporation: | | | | | | | |
| Signature of | Director, C | Officer, or, | , if Directors or C | Officers have not bee | n selected, a | un Incorporat | or: | |
| A- | (ئ | ·6 | ٠ نــد | | | | | |
| | Printed Name: ANDREW CORDLE Title: DIRECTOR | | | | | | | |
| Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies: [See below for required signature(s).] | | | | | | | | |
| Signature: | 4- | _ يــ | بے۔ ج رد | Ç | | | | |
| Printed Nam | | | - | Title: AUT | HORIZED | REPRESEN | ₹TATIV | 'E |
| Signature. | | | | | | | | |
| Printed Nan | ne: , | | - | Title: | | *** * | | |
| Signature: | | • | | | | . •• | | |
| Printed Nan | ne: | | | . Title: | | | | |
| Signature: | | | | | . | | 10 ag | 26 |
| Printed Nar | ne: | ***** | , | Title: | | | * - | : |
| Signature: | | | | | | | · , | Ö |
| Printed Nar | ne: | | | Title: | | | :- | |
| Signature: | | ••• | | • | | | -44 | ال |
| Printed Nat | те: | | | Title: | | | <u>.</u> . | |
| If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. | | | | | | | | |
| If Florida Limited Partnership or Limited Liabilin, Limited Partnership: Signatures of ALL General Partners. | | | | | | | | |
| If Florids Limited Liability Company: Signature of a Member or Authorized Representative. | | | | | | | | |

\$35.00

\$70.00

Articles of Conversion:

Fees for Florida Articles of Incorporation:

All others: Signature of an authorized person.

Fees:

ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

| ARTICLE II | PRINCIPAL OFFICE | | | | |
|---|--|--|--|---------------------------------------|---------------|
| | ace of business/mailing address is: | | | | |
| 8025 WICE | Principal street address KER AVE STE. B | N | failing address, if differen | t is: | |
| ST JOHN, I | ··· | ··· | | | |
| | PURPOSE | <u></u> . | | · · · · · · · · · · · · · · · · · · · | ~~~ |
| | r which the corporation is organized is: | | | | 20 1 1. |
| GENERAL | L INVESTMENTS | | | | , |
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| | | | | | _ |
| ARTICLE V | shares of stock is: 5,000 OPFICERS AND/OR DIRECTORS | | ANDREW CORDLI | E, DIREC | TOF |
| The number of ARTICLE V Name and Title | shares of stock is: 5,000 | | ANDREW CORDLI | | тог |
| The number of | oppicers and/or directors and corder and/or directors and corder and/or directors and corder and/or directors | Name and Title: | ANDREW CORDLI |) | тог |
| The number of ARTICLE V Name and Title | oppicers and/or directors and Cordle, President 116 FERROL ROAD ST AUGUSTINE, FL 32084 | Name and Title: | ANDREW CORDLE | . 32084 | |
| The number of ARTICLE V Name and Title Address: | oppicers and/or directors ANDREW CORDLE, PRESIDENT 116 FERROL ROAD ST AUGUSTINE, FL 32084 | Name and Title: | ANDREW CORDLE 116 FERROL ROAD ST AUGUSTINE, FL | . 32084 | |
| The number of ARTICLE V Name and Title Address: Name and Title Address: | oppicers and/or directors and the condition of the condi | Name and Title: Address: Name and Title: Address: | ANDREW CORDLE 116 FERROL ROAD ST AUGUSTINE, FL | . 32084 | |

| ARTICL. The name | E VI REGISTERED AGENT and Florida street address (P.O. Box NOT acceptable | e) of the registered agent is: |
|------------------|--|---|
| Name: | JOSHUA BELK | |
| Address: | 116 FERROL ROAD | |
| | ST AUGUSTINE, FL 32084 | |
| | | |
| ***** | | **** |
| Having b | een named as registered agent to accept service of prod Scate, I am familiar with and accept the appointment as | ess for the above stated corporation at the place designated in registered agent and agree to act in this capacity |
| | Law Dill | 02/12/2020 |
| | Required Signature/Registered Agent | Date |