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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

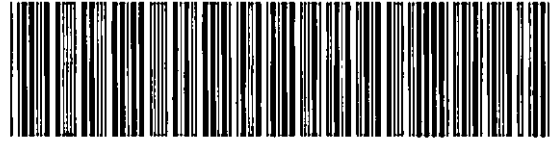
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: **THERMABAND, INC.**

Name of Resulting Florida Profit Corporation

20 MAR -3 PM 12:13

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:

**Debbie Dickinson, Esq.**

Contact Person

*THERMABAND, INC.*

Firm/Company

**2502 Eagle Watch Lane**

Address

**Weston, FL 33327**

City, State and Zip Code

**debbiedickinson01@outlook.com**

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

For further information concerning this matter, please call:

**Debbie Dickinson** at **(248) 890-8910**

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    ☐ \$113.75 Filing Fees and Certified Copy    ☒ \$122.50 Filing Fees, Certified Copy, and Certificate of Status

**Mailing Address:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

New Filing Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Conversion  
For  
Converting Eligible Entity  
Into  
Florida Profit Corporation

20

20 MAR -3 PM 12:13

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:

THERMABAND, LLC ~ L19000284631

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 of Florida

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

on November 15, 2019

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:**

THERMABAND, INC.

Enter Name of Florida Profit Corporation

4. 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 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.

Signed this 27th day of February, 2020.

**Required Signature for Florida Profit Corporation:**

Signature of Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: 20 MAR -3 PM 12:16




Printed Name: Debbie Dickinson Title: Founder/CEO

**Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies:** [See below for required signature(s).]

Signature: 

Printed Name: Markea Dickinson Title: AMBR

Signature: 

Printed Name: Marke Dickinson Title: AMBR

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:**

Articles of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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

**ARTICLE I NAME**

The name of the corporation shall be: ThermaBand, Inc.

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**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

Principal street address

Mailing address, if different is:

2502 Eagle Watch Lane

Weston, FL 33327

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Commercialize wearable and digital technology that regulates body temperature.

**ARTICLE IV SHARES**

The number of shares of stock is: 10,000

**ARTICLE V OFFICERS AND/OR DIRECTORS**

Name and Title: Debbie Dickinson, Founder/CEO

Name and Title: \_\_\_\_\_

Address: 2502 Eagle Watch Lane

Address: \_\_\_\_\_

Weston, FL 33327

Name and Title: Markea Dickinson, Co-Founder/CCO

Name and Title: \_\_\_\_\_

Address: 2502 Eagle Watch Lane

Address: \_\_\_\_\_

Weston, FL 33327

Name and Title: Marke Dickinson, CGO

Name and Title: \_\_\_\_\_

Address: 2502 Eagle Watch Lane

Address: \_\_\_\_\_

Weston, FL 33327

**ARTICLE VI REGISTERED AGENT**


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

Name: Debbie Dickinson, Esq.  
Address: 2502 Eagle Watch Lane  
Weston, FL 33327

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*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*

  
Required Signature/Registered Agent

2/27/2020  
Date