120000033515

(Requestor's Name)		
(Address)		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

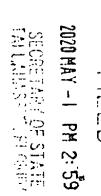
EX 0 6 2020

T. SCOTT



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05/01/20--01011--023 *+105.6



COVER LETTER

TO: New Filing Sec Division of Co			
SUBJECT: Rock I	•		
SUBJECT:		Resulting Florida Profit	Corporation
	of Conversion, Articles or rofit Corporation in acc		s are submitted to convert the following eligible 233 & 607.0202, F.S.
Please return all corresp	oondence concerning this	s matter to:	
Julie Noda			
	Contact Person		
Rock My Yard	d Corp		
	Firm/Company		
329 53rd Dr N	1		
	Address		
West Palm Be	each, FL 3341	5	
	City, State and Zip Code	e	
E-mail address: (t	1928 @ Uah o be used for future annu	al report notification)	
For further information	concerning this matter.	please call:	
Julie Noda		_ _{at (} 561 ₎ 779	9-8825
Name of Co	ontact Person		I 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 Addr	,0ec,	Strant	Addrone

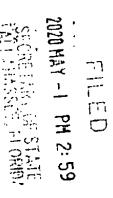
Mailing Address:
New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

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

<u>-</u>	Enter Name of the Converting Entity
2 The converting e	nity is a limited liability company
	(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)
first organized, form	ed or incorporated under the laws of Florida
	(Enter state, or if a non-U.S. entity, the name of the country)
on	
	Enter date "Converting Entity" was first organized, formed or incorporated.
	Enter date "Converting Entity" was first organized, formed or incorporated. Florida Profit Corporation as set forth in the attached Articles of Incorporation: rd Corp
3. The name of the	Enter date "Converting Entity" was first organized, formed or incorporated. Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
3. The name of the Rock My Ya 4. This conversion v	Enter date "Converting Entity" was first organized, formed or incorporated. Florida Profit Corporation as set forth in the attached Articles of Incorporation: The Corporation Enter Name of Florida Profit Corporation as approved by the eligible converting entity in accordance with this chapter and the laws of its
3. The name of the Rock My Ya 4. This conversion vocurrent/organic juris	Enter date "Converting Entity" was first organized, formed or incorporated. Florida Profit Corporation as set forth in the attached Articles of Incorporation: rd Corp Enter Name of Florida Profit Corporation as approved by the eligible converting entity in accordance with this chapter and the laws of its liction.
3. The name of the Rock My Ya 4. This conversion vecurrent/organic juris 5. If not effective of (The effective date: Department of State)	Enter date "Converting Entity" was first organized, formed or incorporated. Florida Profit Corporation as set forth in the attached Articles of Incorporation: The Corporation Enter Name of Florida Profit Corporation as approved by the eligible converting entity in accordance with this chapter and the laws of its liction. The date of filing, enter the effective date: O4/29/2020 Cannot be prior to nor more than 90 days after the date this document is filed by the Florid



Signed this 29th day of April	20	
Required Signature for Florida Profit Corp		
Julia Noda		
Printed Name: Julie NodaTitle:	President	
companies: [See below for required signature		bility
Printed Name: Julie Noda	Title: Member/Owner	
		
	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
If Florida General Partnership or Limited I Signature of one General Partner.	<u> Liability Partnership:</u>	
If Florida Limited Partnership or Limited L Signatures of <u>ALL</u> General Partners.	Liability Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Represen	ntative.	
All others: Signature of an authorized person.		
Fees: Articles of Conversion:	\$35.00	

\$70.00

\$8.75 (Optional) \$8.75 (Optional)

Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:

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

ARTICLE	II PRINCIPAL OFFICE		
	al place of business/mailing address is:		
220 52-4 D- N	Principal street address	Mailing addre	ss, if different is:
West F	Palm Beach, Fl 33415		_
The purpose	III PURPOSE e for which the corporation is organized is: awfull Business		
ARTICLE The number	IV SHARES of stock is:		
	of shares of stock is.	S	
<u>ARTICLE</u>	V OFFICERS AND/OR DIRECTOR		
ARTICLE Name and T		Name and Title:	
ARTICLE Name and T	v officers and/or director	Name and Title:Address:	
ARTICLE Name and T Address:	V OFFICERS AND/OR DIRECTOR Title: Julie Noda /President 329 53rd Dr N WPB, FI 33415	Name and Title: Address:	
ARTICLE Name and T Address: Name and T	V OFFICERS AND/OR DIRECTOR Title: Julie Noda /President 329 53rd Dr N WPB, FI 33415	Name and Title:Address:	
ARTICLE Name and T Address: Name and T	V OFFICERS AND/OR DIRECTOR Title: Julie Noda /President 329 53rd Dr N WPB, Fl 33415 Title: Rolando Noda (Vice President)	Name and Title:Address: PSdort Name and Title:Address:	
ARTICLE Name and T Address: Name and T Address:	V OFFICERS AND/OR DIRECTOR Title: Julie Noda /President 329 53rd Dr N WPB, Fl 33415 Rolando Noda (Vice Pl 329 53rd Dr N	Name and Title: Address: PSdent Name and Title: Address:	2020 HAY
ARTICLE Name and T Address: Name and T Address:	V OFFICERS AND/OR DIRECTOR Title: Julie Noda /President 329 53rd Dr N WPB, Fl 33415 Rolando Noda Vice Pl 329 53rd Dr N WPB, Fl 33415	Name and Title: Address: Address: Address: Name and Title: Name and Title:	2020 HAY - 1

ARTICL The name	E VI REGISTERED AGENT and Florida street address (P.O. Box NOT accu	entable) of the registered agent is:
Name:	Julie Noda	partition in the regime test against its.
Address:	329 53rd Dr N	
, 1,2.21	WPB, FI 33415	
this certifi	icate, I am familiar with and accept the appointm	**************************************
	Required Signature/Registered Agent	Date