

(Requestor's Name)					
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PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
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JUL 232 2021

T. SCOTT



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97/12/21--01030--007 \*\*122.50

#### **COVER LETTER**

TO: New Filing Se	ction		
Division of Co	rporations		
SUBJECT: N	ouvo Studio		
SOBJECT.	· · · · · · · · · · · · · · · · · · ·	Resulting Florida I	Profit Corporation
			nd fees are submitted to convert the following eligible 07.11933 & 607.0202, F.S.
Please return all corres	pondence concerning thi	s matter to:	
Gwendlyn S	Stroud		
	Contact Person		
Nouvo Stud	lio		
	Firm/Company	<u></u>	
1900 Unive	rsity Blvd Sc	outh	
	Address		
Jacksonville	e, FL 32216		
	City, State and Zip Code	2	
Nouvostudi	o@gmail.coi	m	
E-mail address: (t	o be used for future annu	al report notification	ion)
For further information	concerning this matter,	please call;	
Gwendlyn S	Stroud	at (904)	314-8800
	ontact Person		ode 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 and Certified Cop	· · · · · · · · · · · · · · · · · · ·

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

The name of	I NAME the corporation shall be: Nouvo S	tudio INC.	<u>, , , , , , , , , , , , , , , , , , , </u>
ARTICLE . The principal	II PRINCIPAL OFFICE  I place of business/mailing address is:		
	Principal street address	Mailing address, if different is:	
1900 Uni	iversity Blvd SOUTH		
Jackso	nville, FL 32216		
•	for which the corporation is organized is:  y services and retail.		·
Ç	5-0955026		
ARTICLE I	of shares of stock is:		
	V OFFICERS AND/OR DIRECTOR	<u>s</u>	
Name and Ti	tle: Gwendlyn Stroud, CEO	Name and Title:	
Address:	5889 St. Cecilia Rd	Address:	
	Jacksonville, FL 32207		74. 282
Name and Ti	tle:	Name and Title:	
Address:		Address:	
Name and Tit	tle:	Name and Title:	<b>基注</b>
Address:		Address:	
		_	

## **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:
Nouvo Studio
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 FL, USA
(Enter state, or if a non-U.S. entity, the name of the country)
on_April 29, 2019
Enter date "Converting Entity" was first organized, formed or incorporated.
3. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> :  Nouvo Studio 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: July 1, 2021.  (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.

Signed thisday of	July		
Required Signature for Florid:	Profit Corporation:	<u>:</u>	
Signature of Director, Officer, or Equal of Director, or Equal of Dir	r, if Directors or Office	ers have not been selected, an Incorporator:	
Printed Name: Gwerldiyn S	Title:	orporator	
Required Signature(s) on beha companies: [See below for requ	If of Converting Flor ired signature(s).]	ida partnerships, limited partnerships, ar	
Printed Name: Gwendlyn	Stroud	Title: CEO	
Printed Name:	÷	Title:	
Signature:			
Printed Name:	· · · · · · · · · · · · · · · · · · ·	Title:	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name;		Title:	
If Florida General Partnership Signature of one General Partner.	or Limited Liability	Partnership:	
If Florida Limited Partnership Signatures of <u>ALL</u> General Partnership	or Limited Liability ers.	Limited Partnership:	
If Florida Limited Liability Cor Signature of a Member or Author			
All others: Signature of an authorized person			
Fees: Articles of Conversion: Fees for Florida Articles of	of Incorporation:	\$35.00 \$70.00	

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

Certified Copy: Certificate of Status:

July 1, 2021