P21000081895

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Susmess Emily Hume)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
L17000189294
inc suffix
RA signature
Inc suffix RA signature allies titles W21000091492 Shaves of Stock
WZ/UDU91492 Shaves of Stock

Office Use Only



600368008726

06/14/21--01037--012 **105

2013/12/12/12/06

 \mathcal{M}

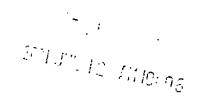
Articles of Conversion

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	<u>:</u>
Im social media UC	
Enter Name of the Converting Entity	
2. The converting entity is a LLC. L17000189294	
(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 FICVIC (Enter state, or if a non-U.S. entity, the name of the country)	
$S_{rat} = I_r \cap DID$	
on <u>September Gracella XU17</u> 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>	<u>:</u>
JM Innovations Inc.	
Enter Name of Florida Profit Corporation	
4. This conversion was approved by the eligible converting entity in accordance with this chapter and current/organic jurisdiction.	
5. If not effective on the date of filing, enter the effective date: 2021 (The effective date: Cannot be prior to nor more than 90 days after the date this document is h	'w the Flo
Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this listed as the document's effective date on the Department of State's records.	
· ····•	
	2021
	· .

Signed thisday of	. 20
Required Signature for Florida Profit Corporation:	
Printed Name: Mane M. Ditle:	rs have not been selected, an Incorporator:
Required Signature(s) on behalf of Converting Florid companies: [See below for required signature(s).] Signature:	da partnerships, limited partnerships, and limited liabilit
Printed Name: Melanie Mallell	_Title:CfO
Signature:	
Printed Name: Seral Davis	Title: (C)
Signature:	
Printed Name:	_ Title:
Signature:	
Printed Name:	Title:
Signature:	<u> </u>
Printed Name:	_ Title:
Signature:	
Printed Name:	Title:
If Florida General Partnership or Limited Liability I Signature of one General Partner.	Partnership:
If Florida Limited Partnership or Limited Liability I Signatures of ALL General Partners.	<u>imited Partnership:</u>
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: Certified Copy: Certificate of Status:

\$70.00

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

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

·	
The name of the corporation shall be:	DVATIONS INC. FILMENTE MIN
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	- 12 T. [1]
Principal street address	Mailing address, if different is:
4430 SW 21st Street	PD BOX 767
4130-500 21st Street Haywood, FL 33023	Fairburn GA 30213
ARTICLE III PURPOSE The purpose for which the corporation is organized is: SOCIAL MORE TO COMMENTER EXCENSIVE SECTION AND COMMENTS.	Mr. applications
Computer software deur Business branding.	lding, protnotions and adve
ARTICLE IV SHARES The number of shares of stock is: 5,000 ARTICLE V OFFICERS AND/OR DIRECTORS	
Name and Title: Melanie i) Yalane	Name and Title: Jora Davis Coo
	Address: POBOX FLOT FOUNDAMENT OF BOOK
Name and Title:	Name and Title:
Address:	Address:
Name and Title:	Name and Title:
Address:	Address:

ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of t	he registered agent is:
Name: United States Confirmation Address: 5575 S. Semoran Blue	ignals INC
Address: 5575 Semoran Blva	1
Suk 36 ananto FL 308	
***********	*********
Having been named as registered agent to accept service of process for	or the above stated corporation at the place design Stared quant and norge to get in this connects:
this certificate, I am familiar with and accept the appointment as regis	Mereu ugem una ugree to act in ims capacity
100-	17.4.2021
Required Signature/Registered Agent	' Date

•