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1.805.449.2638

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Email: info@CorpNet.com



www.CorpNet.com



October 13, 2021

Registration Section
Division of Corporations
2415 N. Monroe St., Suite 810
Tallahassee, FL 32303

RE: SIMPLIFIED MANAGEMENT SOLUTIONS, INC.

To whom it may concern:

The Enclosed Articles of Conversion and Fee(s) are submitted for filing. Also, please find enclosed a check for state filing fees in the amount of \$113.75 made payable to the FL Dept of State. For information to this filing at the undersigned.

Thank you in advance and please return all correspondence in regards to this filing using the pre addresses stamped envelope included.

Sincerely,

Amanda J. Beren, Document Processor CorpNet™, Incorporated 888-449-2638 Ext. 105 filings@corpnet.com



## 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:

SIMPLIFIED MANAGEMENT SOLUTIONS, INC.
Enter Name of the Converting Entity
2. The converting entity is a Corporation
(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 Indiana  (Enter state, or if shop, I.I.S. entiry, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
on 01/16/2009
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> Dedicated Management Solutions, 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 Florid Department of State.)

Signed this 12th day of October	, 20 <u> </u>				
Required Signature for Florida Profit Corporation:					
Signature of Director, Officer, or, if Directors or Officer.	ers have not been selected, an Incorporator:				
Printed Name: Scott Meister Title: Pres	sident				
Required Signature(s) on behalf of Converting Flor companies: [See below for required signature(s).]  Signature:	ida partnerships, limited partnerships, and limited liability				
Printed Name: Scott Meister					
Signature:					
Printed Name:	Title:				
Signature:					
Printed Name:	Title:				
Signature:	·				
Printed Name:	Title:				
Signature:	<del></del>				
Printed Name:	Title:				
Signature:	<del></del>				
Printed Name:	Title:				
If Florida General Partnership or Limited Liability Signature of one General Partner.	Partnership:				
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: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$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)

ARTICLE I The name of the	he corporation shall be: Dedicated M	anagemen	t Solutions, Inc
ARTICLE II	PRINCIPAL OFFICE		<u>ر</u>
The principal j	place of business/mailing address is:	•	
	Principal street address		Mailing address, if different is:
2524 Cc	ourtland Ave.		
North Po	ort, FL 34286		
	T PURPOSE  or which the corporation is organized is: ness consulting, accounting, bookke	eeping, training	ı. content creation, and tutoring.
ARTICLE II The number of	SHARES 1,700,000  OFFICERS AND/OR DIRECTORS		
Name and Titl	e: Scott Meister, President	Name and Title	Angela Meister, Vice President
Address:	2524 Courtland Ave.	Address:	2524 Courtland Ave.
	North Port, FL 34286		North Port, FL 34286
Name and Titl	e:	Name and Title	
Address:		Address:	
N			
ivaine and 11tt	e:	Name and Title	
Address:		Address:	
	<del></del>	-	
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	and Florida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	Registered Agents Inc.		
Address:	7901 4th St N STE 300, St.		
	Petersburg, FL 33702		
	een named as registered agent to accept service of prociente, I am familiar with and accept the appointment as	•	signated in
	Bel Time	10/12/2021	
	Required Signature/Registered Agent	Date	