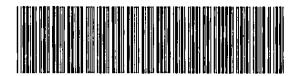
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## **COVER LETTER**

TO:	New Filing So Division of Co				
SUBJ	ECT:	В	EEJA 3	LNC	
5050		Name o	f Resulting	Florida Profit	Corporation
		of Conversion, Articles Profit Corporation" in ac			are submitted to convert the following eligible 33 & 607.0202, F.S.
Please	return all corre	spondence concerning th	nis matter to	:	
	MAL	- INI GADD  Contact Person	AW		
		Contact Person			
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Enclos	sed is a check fo	or the following amount:			
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□ \$10	oo.oo riiing ree	s □\$113.75 Filing Fee and Certificate of Status		5 Filing Fees fied Copy	☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add				Address:
	New Filing S				iling Section on of Corporations
	Division of C				on of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## 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.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:
BEEJA LLC
Enter Name of the Converting Entity
2. The converting entity is a
first organized, formed or incorporated under the laws of <u>FL</u> (Enter state, or if a non-U.S. entity, the name of the country)
on 231d July 2021
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> :
BEEJA 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 2164 day of	September	. 20 2]
Requir	ed Signature for Florida	Profit Corporation:	
Signatu	re of Director, Officer, or,	if Directors or Officer	s have not been selected, an Incorporator:
	Malini Gaddon	\	<del></del>
Printed	Name: MALINE GADI	Am Title: Man	aga   Director
compai	nies: [See below for require	red signature(s).l	la partnerships, limited partnerships, and limited liability
Signatu	re: ///w/iki 40	y dan	
Printed	Name: MALIMI	GODDAN .	Title: Managus Divers
Printed	Name:		_ Title:
Signatu	re:		
Printed	Name:		Title:
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Printed	Name:		Title:
Signatu	re:		
Printed	Name:		_ Title:
Signatu	re:		
Printed	Name:		_ Title:
	da General Partnership or of one General Partner.	or Limited Liability I	Partnership:
	da Limited Partnership of res of ALL General Partne		imited Partnership:
	da Limited Liability Con re of a Member or Authori		
All othe Signatu	e <u>rs:</u> re of an authorized person.		
Fees:			
	Articles of Conversion: Fees for Florida Articles of Certified Copy:	of Incorporation:	\$35.00 \$70.00 \$8.75 (Optional)

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

Certificate of Status:

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

ARTICLE I NAME	Auc
The name of the corporation shall be: BEEJA	JNC
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
4546 Simmons Rd	
Bilando , FL 32812	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	a ctivity lox which
To Engage in any law for	CCITTITE DO WHICH
Corporations may be in	a ctivity for which corporated in the State of.
Florida.	N_
	21 OC
	25 25
	_ •
ARTICLE IV SHARES The number of shares of stock is: 10	AH IO: Oh
ARTICLE V OFFICERS AND/OR DIRECTORS	bise dol
Name and Title: MALINE GADDAM	Name and Title:
1. m 1. 1 0 - D 1	Address:
07/ando, FL 32812	
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 acce	ptable) of the registered agent is:
Name: Malini Gaddon	
Address: 4546 Simmons Ad	
01/audo, FL 32812-	
,	
**************	***************
Having been named as registered agent to accept service of this certificate, I am familiar with and accept the appointme	f process for the above stated corporation at the place designated in ent as registered agent and agree to act in this capacity
Malini Gardam	09/21/2021
Required Signature/Registered Agent	Date