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| Special Instructions to Filing Officer: | | | | |
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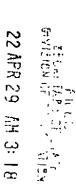
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S. CHATHAM



COVER LETTER

| TO: | New Filing Sec Division of Co | | | | | |
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| CHINI | | ECH, INC. | | | | |
| SUBJ | ECT: | | Resulting Flor | ida Profit | Corporation | |
| | | of Conversion. Articles o rofit Corporation" in acc | | | s are submitted to convert the fo 033 & 607.0202, F.S. | llowing eligible |
| Please | return all corres | pondence concerning thi | s matter to: | | | |
| TIM | OTHY SH | IIELDS | | | | |
| | | Contact Person | | | | |
| KE | LLEY KR | ONENBERG | | | | |
| | | Firm/Company | | _ | | 3.78 22 A |
| 103 | 60 W STA | TE RD 84 | | | | APR 29 |
| | | Address | | | | , , , |
| FOR | RT LAUDE | ERDALE, FL 33 | 3324 | | | AH 3: 18 |
| | | City, State and Zip Cod | 2 | | | 9 P |
| | _ | eykronenberg.c | | | | |
| į: | I-mail address: (t | o be used for future anni | al report notif | ication) | | |
| | | concerning this matter, | please call: | | | |
| Tim | othy Shiel | ds | _at (954 | ,37(| 0-9970 | |
| | Name of Co | ontact Person | Area | Code and | Daytime Telephone Number | |
| Enclos | ed is a check for | the following amount: | | | | |
| ■ \$10 | 5.00 Filing Fees | □\$113.75 Filing Fees and Certificate of Status | □\$113.75 Fi and Certified | _ | □\$122.50 Filing Fees, Certified Copy, and Certificate of Status | |
| | Mailing Addi New Filing Sc Division of Co P.O. Box 632 Tallahassee, F | ection orporations 7 | | New f Divisi The C 2415 f | Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303 | |

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.



| Signed this 18th day of April | . 20 22 | |
|---|---|---------------------|
| Required Signature for Florida Profit Corporation | | |
| Signature of Director, Officer, or off Directors or Officer | cers have not been selected, an Incorporator: | |
| The Man | | |
| Printed Name: Timothy Masshardt Title: Chi | ef Operating Officer | |
| Required Signature(s) on behalf of Converting Flocompanies: [See below for required signature(s)] | rida partnerships, limited partnerships, and | l limited liability |
| Signature: | | |
| Printed Name: Timothy Masshardt | Title: Chief Operating Officer | |
| Signature: | | |
| Printed Name: | Title: | |
| Signature: | | |
| Printed Name: | Title: | |
| Signature: | | |
| Printed Name: | Title: | |
| Signature: | | |
| Printed Name: | Title: | |
| Signature: | ··· | |
| Printed Name: | Title: | |
| If Florida General Partnership or Limited Liability Signature of one General Partner. | y Partnership: | |
| <u>If Florida Limited Partnership or Limited Liabilit</u> | v Limited Partnership: | |
| Signatures of ALL General Partners. | | |

<u>If Florida Limited Liability Company:</u> Signature of a Member or Authorized Representative.

<u>All others:</u> Signature of an authorized person.

Fees:

Articles of Conversion:

\$35.00

Fees for Florida Articles of Incorporation:

\$70.00

Certified Copy:

\$8.75 (Optional)

Certificate of Status:

\$8.75 (Optional)



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: | | |
|---|---|--|-------------------------|
| не рицегра | · · | | |
| | Principal street address | Mailing address, if different is | : |
| 5659 S | TRAND COURT SUITE 106 | 5659 STRAND COURT SU | ITE 10 |
| VAPLE | S, FL 34110 | NAPLES, FL 34110 | |
| | III PURPOSE e for which the corporation is organized is: ful purposes | | |
| | | | |
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| <u>_</u> _ | | | <u> </u> |
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| | | LION | |
| ne number | of shares of stock is: IEN (10) IVIIL | LION | |
| ne number | v of shares of stock is: I EN (10) IVIILI | MICHAEL O GIALLOMBAS | RDO, CEC |
| ne number RTICLE | v of shares of stock is: I EN (10) IVIILI | Name and Title: MICHAEL O. GIALLOMBAE | |
| ne number RTICLE | of shares of stock is: TEN (TO) WILL V OFFICERS AND/OR DIRECTORS itle: TIMOTHY P. MASSHARDT, COO | Name and Title: MICHAEL O. GIALLOMBAE Address: 5696 STRAND COURT S | SUITE 10 |
| ne number RTICLE ame and T ddress: | of shares of stock is: TEN (TO) WILL V OFFICERS AND/OR DIRECTORS Title: TIMOTHY P. MASSHARDT, COO 5696 STRAND COURT SUITE 106 NAPLES, FL 34110 | Name and Title: MICHAEL O. GIALLOMBAE Address: 5696 STRAND COURT S NAPLES, FL 341 | 10 22 |
| ne number RTICLE ame and T ddress: ame and T | v of shares of stock is: TEN (TO) WILL v officers and/or directors Title: TIMOTHY P. MASSHARDT, COO 5696 STRAND COURT SUITE 106 | Name and Title: Address: MICHAEL O. GIALLOMBAF 5696 STRAND COURT S NAPLES, FL 341 Name and Title: | 10 2 10 22 11 P.P. 2 9 |
| ne number RTICLE ame and T ddress: | of shares of stock is: TEN (TU) WILL V OFFICERS AND/OR DIRECTORS Title: TIMOTHY P. MASSHARDT, COO 5696 STRAND COURT SUITE 106 NAPLES, FL 34110 Title: JASON SHEA, CTO 5696 STRAND COURT SUITE 106 | Name and Title: MICHAEL O. GIALLOMBAE Address: 5696 STRAND COURT S NAPLES, FL 341 | 10 22 MPP 29 //H |
| ne number RTICLE ame and T ddress: ame and T ddress: | of shares of stock is: TEN (TU) WILL V OFFICERS AND/OR DIRECTORS Title: TIMOTHY P. MASSHARDT, COO 5696 STRAND COURT SUITE 106 NAPLES, FL 34110 5696 STRAND COURT SUITE 106 NAPLES, FL 34110 | Name and Title: Address: MICHAEL O. GIALLOMBAE 5696 STRAND COURT S NAPLES, FL 341 Name and Title: Address: | 10 22 1/PR 29 /1H 3: 1/ |
| RTICLE ame and T ddress: ame and T ddress: | of shares of stock is: TEN (TU) WILL V OFFICERS AND/OR DIRECTORS Title: TIMOTHY P. MASSHARDT, COO 5696 STRAND COURT SUITE 106 NAPLES, FL 34110 Title: JASON SHEA, CTO 5696 STRAND COURT SUITE 106 | Name and Title: Address: MICHAEL O. GIALLOMBAE 5696 STRAND COURT S NAPLES, FL 341 Name and Title: Address: | 10 22 1/PR 29 /1H 3: 1/ |

| ARTICL The name | E VI REGISTERED AGENT and Florida street address (P.O. Box NOT accep | otable) of the registered agent is: |
|-----------------|---|--|
| Name: | TIMOTHY SHIELDS | |
| Address: | 10360 W STATE RD 84 | |
| | FORT LAUDERDALE FL, 33324 | |
| | | ************************************** |
| | Required Signature/Registered Agent | 4/16/2022 Date |