## PAA00051192

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

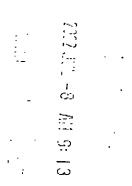
Office Use Only



100390135441



07/03/22--01025--032 ++122.50





## 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:

Spot On Lending
Enter Name of the Converting Entity
2. The converting entity is a Corporation
(Enter entity type. Example: limited habitity company, limited partnership, general partnership, common law or business trust, etc.)
Tirst organized, formed or incorporated under the laws of California
(Enter state, or if a non-U.S. entity, the name of the country)
on 04/12/2018
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> Spot On Lending
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: 06/30/2022.  The effective date: Cannot be prior to pur more than 90 days after the date this document is filed by the Florida.
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
isted as the document's effective date on the Department of State's records.

Signed this 30th day of June	2022	
Required Signature for Florida Profit Corporation	<u>:</u>	
Signature of Director, Officer, or, if Directors or Officer.    Signature of Director, Officer, or, if Directors or Officer.   Signature of Director, Officer, or, if Directors or Officer.   Printed Name:   Pre-		r:
Printed Name: Jenniter Bates Title: Pre	esident	
<u>companies:</u> [See below for required signature(s).]	rida partnerships, limited partnerships,	
Signature: Jennifer Bates Printed Name: Jennifer Bates		
Printed Name: Jennifer Bates	_ <sub>Title:</sub> President	_
Signature:		_
Printed Name:	Title:	***
Signature:		_
Printed Name:	Title:	_
Signature:		<del></del>
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:	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	v Limited Partnership:	
<u>If Florida Limited Liability Company:</u> Signature of a Member or Authorized Representative.		(8)
<u>All others:</u> Signature of an authorized person.		2022 ( 17.
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)	-8 £1 9: 12

## 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: Spot On Lending PRINCIPAL OFFICE ARTICLE II The principal place of business/mailing address is: Mailing address, if different is: Principal street address 5193 Groovers Landing Rd SE Marietta, GA 30101 ARTICLE III PURPOSE The purpose for which the corporation is organized is: To Do Mortgage Lending and Brokering The number of shares of stock is: 2000 ARTICLE IV SHARES ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: Jennifer Bates, President Name and Title: 5193 Groovers Landing Rd SE Address: Address: Acworth, GA 30101 Name and Title: Name and Title: Address: Address: Name and Title: Name and Title: Address: Address:

ARTICLE VI	REGISTERED AGENT	
The name and F	orida street address (P.O. Box NOT acceptable) of the registered agent is	s:

	Registered Agents Inc. c/o Bill Havre
s:	7901 4th St N. STE 300St.
	Petersburg, FL 33702

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate. I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Required Signature/Registered Agent

<u>7/1/2022</u>

Date