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(Requ	uestor's Name)		
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(City/	State/Zip/Phone	e #)	
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(Document Number)			
Certified Copies	Certificates	s of Status	
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DIVISION OF SEEL ORIDA



COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Pharmazu Inc.				
30D01.C1	of Resulting Flor	ida Profit	Corporation	
The enclosed Articles of Conversion, Articles entity into a "Florida Profit Corporation" in ad				zing eligible
Please return all correspondence concerning the	his matter to:			
Adam Brooks				
Contact Person				
Pharmazu LLC				
Firm/Company				
1881 W. Frederick Small Ro	ad			
Address				
Jupiter FL 33458				
City, State and Zip Co	nde			
adam@pharmazu.com				
E-mail address: (to be used for future an	nual report notif	ication)		
For further information concerning this matter	r, please call:			
Deborah	_{at (} 917	₎ 575	5-3095	
Name of Contact Person	Area	Code and	Daytime Telephone Number	
Enclosed is a check for the following amount:	:			
□ \$105.00 Filing Fees □\$113.75 Filing Fee and Certificate of Status	es □\$113.75 Fi and Certified	~	■\$122.50 Filing Fees. Certified Copy, and Certificate of Status	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		New I Divisi The C	Address: Ciling Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

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.



Signed this 4th day of July	20_22	
Required Signature for Florida Profit Corporation		
Signature of Director, Officer, or, if Directors or Officer	· 	
Printed Name: Adam Brooks Title: Pre	sident	
Required Signature(s) on behalf of Converting Flo companies: [See below for required signature(s).]	rida partnerships, limited partnerships, a	nd limited liability
Signature:		_
Printed Name: Adam Brooks	_{Title:} Managing Member	-
Signature:		-
Printed Name:	Title:	-
Signature:		-
Printed Name:	Title:	-
Signature:		-
Printed Name:	Title:	-
Signature:	<u> </u>	
Printed Name:	Title:	-
Signature:		-
Printed Name:	Title:	-
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	y Limited Partnership:	
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	

\$70.00

\$8.75 (Optional)

\$8.75 (Optional)

Fees for Florida Articles of Incorporation:

Certified Copy:

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 The name of the corporation shall be: Pharmazu Inc. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Principal street address Mailing address, if different is: 1881 W, Frederick Small Road Jupiter FL 33458 ARTICLE III PURPOSE The purpose for which the corporation is organized is: General Purposes ARTICLE IV SHARES The number of shares of stock is: 3000 ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: Adam Brooks CEO Name and Title: 1881 W.Frederick Small & Address: Address: Jupiter FL 33458 Name and Title: Name and Title: Address: Address: Name and Title: Name and Title: Address: Address:

<i>ARTICL</i> The name	E VI REGISTERED AGENT and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name:	Adam Brooks	, or the registered agent is.
Address:	1881 W Frederick Small RD	
	Jupiter FL 33458	
	**************************************	**************************************
	120	July 4th 2022

Date

Required Signature/Registered Agent