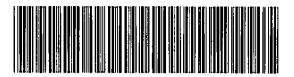
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(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	·
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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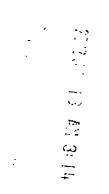




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## COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: JORFAC INC	
Name of Resulting Florid	da Profit Corporation
The enclosed Articles of Conversion, Articles of Incorporation, entity into a "Florida Profit Corporation" in accordance with ss.	
Please return all correspondence concerning this matter to:	
SETH E SALVER	
Contact Person	<del></del>
SALVER + SALVER, LLP	
Firm/Company .	
12550 BISCAYNE BLVD STE 700	<u></u>
Address	
NORTH MIAMI, FL 33181	<u> </u>
City, State and Zip Code	
SETH@SALVER.COM  E-mail address: (to be used for future annual report notifi	cation)
For further information concerning this matter, please call:	004 7000
SETH E SALVER at (305  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 Fees □\$113.75 Fi	ling Fees \$122.50 Filing Fees,
and Certificate of and Certified Status	Copy Certified Copy, and Certificate of Status
Mailing Address:	Street Address:
New Filing Section Division of Corporations	New Filing Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810  Tallahassee, 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.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:  JORFAC 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 DELAWARE
(Enter state, or if a non-U.S. entity, the name of the country)
<sub>on</sub> JULY 25, 2019
Enter date "Converting Entity" was first organized, formed or incorporated.
3. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:  JORFAC 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: 05/20/2022
(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.)  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.
noted as the accument a creedite date on the Department of State a fections.

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

ARTICLE I	The corporation shall be: JORFAC IN		
	place of business/mailing address is:		
	Principal street address	Mailing address,	if different is:
12550 BIS	SCANYE BLVD #700		
NORT	H MIAMI, FL 33181		
	for which the corporation is organized is:		
ARTICLE I	IV SHARES of shares of stock is: 1000		
ARTICLE	V OFFICERS AND/OR DIRECTORS		
Name and T	ide:	Name and Title:	
Address:	12550 BISVAYNE BLVD #700	Address:	
	NORTH MIAMI, FL 33181		
Name and T	itle:	Name and Title:	· · · · · · · · · · · · · · · · · · ·
Address:		Address:	
Name and T	Title:	Name and Title:	
Address:		Address:	
			દ્

	ers have not been selected, an Incorporator:	ector, Officer, or, if Directors or Offic	Signature of D
			··
	ESIDENT	OSE R CATTAN-AMKIE Title: PR	Printed Name:
ited liability	ida partnerships, limited partnerships, and lim	sture(s) on behalf of Converting Flor	Required Sign
		ee bolowfur required signature(s).]	Signature:
	Title: PRESIDENT	OSE R CATTAN AMKIE	Printed Name:
	True:	Collet	Signature:
	Title;		Printed Name:
			Signature:
	Title:		Printed Name:_
			Signature:
	Title:		Printed Name:_
			Signature:
	Title:		Printed Name:_
	<del>,</del>		Signature:
	Title:	Carrier Committee Co	Printed Name:
	Partnership:	ral Partnership or Limited Liability General Partner.	If Florida Gen
	na kanada	1 ft 1 ft 44 Ma	
	Limited Partnership:	ted Partnership or Limited Liability L General Partners!	<u>If Florida Lim</u> Signatures of <u>A</u>
		ed Liability Company:	lf Florida Lim
		ember or Authorized Representative.	Signature of a M
184		uthorized person.	All others:
رے			Fees:
	\$35.00 \$70,00	ember or Authorized Representative.	If Florida Limi Signature of a M All others: Signature of an Fees: Articles

The name	E VI REGISTERED AGENT  and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name:	SETH E SALVER
Address:	12550 BISCAYNE BLVD #700
	NORTH MIAMI, FL 33181

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

Date