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SECRETARY OF STATE
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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 1, 2023

R. CLAY MATHEWS, ESQ. 100 SOUTH ASHLEY DRIVE STE 1490 TAMPA, FL 33602

SUBJECT: SMOLKER MATHEWS, LLP

Ref. Number: W23000013675

We have received your document for SMOLKER MATHEWS, LLP and your check(s) totaling \$86.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

If you are trying to convert your LLP to a P.A. you have submitted the wrong forms. The filing fee is \$105.00. Please send another check in the amount of \$63.75 along with the correct documents.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Karen Lovelace Regulatory Specialist II

Letter Number: 923A00002471

2023 FEB 22 AM 7: 58 SECRETARY OF STATE

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COVER LETTER

New Filing Section Division of Corporations

TO:

SUBJECT: Smolker Mathews, P.	.A.					
	Resulting Florid	la Profit C	Corporation			
The enclosed Articles of Conversion. Articles of entity into a "Florida Profit Corporation" in acc				he follo	owing elig	gible
Please return all correspondence concerning thi	s matter to:					
R. Clay Mathews, Esq.						
Contact Person	· <u>-</u>					
Smolker Mathews, LLP						
Firm/Company						
100 South Ashley Drive, Sui	te 1490					
Address	,	_				
Tampa, FL 33602					202 SE	
City, State and Zip Cod	le	_			2023 FEB 22 SECRETARY	* 'P'T)
clay@smolkermathews.com				>: 	ξ <u>γ</u>	24 E
E-mail address: (to be used for future ann	ual report notific	cation)		(S) (•	: 11
For further information concerning this matter.	please call:			i.,	AH 7:	(1200)
R. Clay Mathews, Esq.	_{at (} 813	,819	-2552	. ! ::	59	4.,
Name of Contact Person	Area	Code and	Daytime Telephone Nun	ıber		
Enclosed is a check for the following amount:						
□ \$105.00 Filing Fees □\$113.75 Filing Fees and Certificate of Status		•	□\$122.50 Filing Fees. Certified Copy. and Certificate of Status	×	Check \$ le3. 7 enclus	15 ed
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		New F Division The Co 2415 N	Address: iling Section on of Corporations entre of Tallahassee J. Monroe Street, Suite assee, FL 32303	810	pursus utter 2/1/2	mt to dallal 3.

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:

Smolker Mathews, LLP

Enter Name of the Converting Entity
2. The converting entity is a limited liability partnership
(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 Florida (Forter state, or if a non-U.S. entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
on September 10, 2021
Enter date "Converting Entity" was first organized, formed or incorporated.
Smolker Mathews, P.A. Enter Name of Florida Profit Corporation 1. This accordance with this chapter and the laws of its
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: January 1, 2023. (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 18th day of February	. 2023	
	ed Signature for Florida Profit Corporation		
Signatu	re of Director. Officer, or, if Directors or Offic		
Printed	Name: R. Clay Mathews Title: Pre	sident / Director	
	ed Signature(s) on behalf of Converting Flories: [See below for required signature(s).]	rida partnerships, limited partnerships, a	nd limited liability
Signatu	те:		_
Printed	Name: R. Clay Mathews	Title: General Partner / Managing Partner	-
	re:		-
Printed	Name:	Title:	-
Signatu	re:		-
Printed	Name:	Title:	_
Signatu	ге:		-
Printed	Name:	Title:	_
Signatu	re:		_
Printed	Name:	Title:	-
Signatu	re:		_
Printed	Name:	Title:	_
	ida General Partnership or Limited Liabilit ire of one General Partner.	v Partnership:	
	ida Limited Partnership or Limited Liabilitures of ALL General Partners.	v Limited Partnership:	
If Flor Signatu	ida Limited Liability Company: are of a Member or Authorized Representative.		20 SE
All oth Signati	ers: ure of an authorized person.		E A A A A A A A A A A A A A A A A A A A
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)	RY UESTITE

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

RTICLE I				
he principal	place of business/mailing address is:			
	Principal street address	Mailing addr	ress, if different is:	
100 South Ashley Drive, Suite 1490		Same		
Гатра,	Florida 33602		<u></u>	
•	for which the corporation is organized is:			
_				
	-			
-				
-	W. GWADDG		· · · · · · · · · · · · · · · · · · ·	
LRTICLE The number of	IV SHARES of shares of stock is:			
	IV SHARES of shares of stock is: 100			
ARTICLE	V OFFICERS AND/OR DIRECTORS R Clay Mathews President/Director	Name and Title:		
ARTICLE Vame and T	V OFFICERS AND/OR DIRECTORS R Clay Mathews President/Director	Name and Title:		
ARTICLE Vame and T	V OFFICERS AND/OR DIRECTORS itle: R. Clay Mathews, President/Director			
ARTICLE Name and T Address:	v OFFICERS AND/OR DIRECTORS R. Clay Mathews, President/Director 100 South Ashley Drive, Suite 1490 Tampa, FL 33602 David Smolker, Vice President/Director	Address:		
ARTICLE Name and T Address: Name and T	v OFFICERS AND/OR DIRECTORS R. Clay Mathews, President/Director 100 South Ashley Drive, Suite 1490 Tampa, FL 33602 David Smolker, Vice President/Director	Address: Name and Title:		
Name and T Address:	v OFFICERS AND/OR DIRECTORS itle: R. Clay Mathews, President/Director 100 South Ashley Drive, Suite 1490 Tampa, FL 33602 itle: David Smolker, Vice President/Director	Address:		
ARTICLE Name and T Address: Name and T Address:	v OFFICERS AND/OR DIRECTORS R. Clay Mathews, President/Director 100 South Ashley Drive, Suite 1490 Tampa, FL 33602 David Smolker, Vice President/Director 100 South Ashley Drive, Suite 1490 Tampa, FL 33602	Address: Name and Title:	POZ3 FEB 2 SECRETAD TALLAS	
ARTICLE Name and T Address: Name and T Address:	v OFFICERS AND/OR DIRECTORS R. Clay Mathews, President/Director 100 South Ashley Drive, Suite 1490 Tampa, FL 33602 David Smolker, Vice President/Director 100 South Ashley Drive, Suite 1490	Address: Name and Title: Address:	DOZIFEB 22 SECRETARY CALLAST SE	

ARTICL	· · · · · · · · · · · · · · · · · · ·	and the North and an artists
The <u>name</u>	and Florida street address (P.O. Box NOT	acceptable) of the registered agent is:
Name:	R. Clay Mathews	
Address:	100 South Ashley Drive, Suite 1490	
	Tampa, FL 33602	
******** Having be	**************************************	**************************************
this certifi	cate, I am familiar with and accept the appo	intment as registered agent and agree to act in this capacity
	Required Signature/Registered Agent	2-18-23 Date