23000018869

(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:
}

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RECEIVED



March 7, 2023

CAPITAL CONNECTION, INC.

SUBJECT: CARBON RESEARCH INC.

Ref. Number: W23000027116

Please accept our apology for failing to mention this in our previous letter.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

If you have any further questions concerning your document, please call (850) 245-6000.

Letter Number: 223A00005335

Summer Chatham Regulatory Specialist III Director's Office

www.sunbiz.org

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

CARBON RESEARCH INC	
DI DI 1000000000000000000000000000000000	
Please Debit 120000000257 For: 105	
Thank you Seth Neeley	
145/	Art of Inc. File
	LTD Partnership File
,	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art, of Amend, File
	RA Resignation
	Dissolution / Withdrawał
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
,	Officer Search
Signature	Fictitious Search
	Fictitious Owner Search
Jighatare //	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
Name Date Time	UCC 11 Search
name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

COVER LETTER

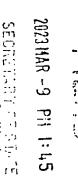
TO: New Filing Sect Division of Corp				
SUBJECT: CARBO		H INC.		
		Resulting Flori	da Profit (Corporation
The enclosed Articles of entity into a "Florida Pro				are submitted to convert the following eligible 33 & 607,0202, F.S.
Please return all correspond	ondence concerning this	matter to:		
M. VINCENT F	PAZIENZA ES	Q		
	Contact Person			
PAZLAW,PulC				
	Firm/Company			
23110 STATE	ROAD 54 #27	7		
	Address			
LUTZ, FLORIC	DA 33549			
(City. State and Zip Code	<u>.</u>	_	
VINCENT@PA				
E-mail address: (to	be used for future annu	ial report notifi	cation)	
For further information of	-			
M. V NC E NT	PAZIENZA	_at <u>(</u> 813		9-9595
Name of Co	ntact Person	Area	Code and	Daytime Telephone Number
Enclosed is a check for t	the following amount:			
	☐\$113.75 Filing Fees and Certificate of Status	□\$113.75 Fill 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

Street Address:

New Filing Section Division of Corporations The Centre of Tallahassee 2415 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.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:

1. 1. 1. 1. 1.

CARBON RESEARCH LLC
Enter Name of the Converting Entity
2. The converting entity is a LIMITED LIABILITY COMPANY
(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
(Enter state, or if a non-U.S. entity, the name of the country)
on MARCH 1, 2017
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> : CARBON RESEARCH 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: (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 17TH day of FEBRUARY	<u> </u>	
Required Signature for Florida Profit Corporati		
Signature of Director, Officer, or, if Directors or Of		ator:
Printed Name: WADE BADER Title: PF	RESIDENT	
Required Signature(s) on behalf of Converting F companies: [See below for required signature(s).]	lorida partnerships, limited partnershi	ps, and limited liability
Signature:		
Printed Name: WADE BADER Signature:	Title: MEMBER	_ _
Signature:		
Printed Name:	Title:	7023 P
Signature:		TAR T
Printed Name:	Title:	HAR -9 P
Signature:		
Printed Name:	Title:	_
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
If Florida General Partnership or Limited Liabil Signature of one General Partner.	lity Partnershin:	
If Florida Limited Partnership or Limited Liabil Signatures of ALL General Partners.	lity Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative	re.	
All others: Signature of an authorized person.		
Foes:		

\$35.00

Articles of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:

\$70.00

\$8.75 (Optional) \$8.75 (Optional)

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

Mailing address, if different is:
ES
2923 SEC:
AR
CO
ं क
Name and Title:
Address:

Name and Title:
Address:
Name and Title:
Address:

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: PAZLAW PLL

23110 STATE ROAD 54 #277

LUTZ, FLORIDA 33549

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

Date