(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Sasiness Entry Name)
(Document Number)
Certified Copies Certificates of Status
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COVER LETTER

TO: New Filing S							
Division of C REIFY	orporations TECHNOLOGIES, IN	JC					
SUBJECT:		VC					
	Name o	of Resulting Fl	orida Proti	t Corporation	_		
The enclosed Articles entity into a "Florida	of Conversion. Articles Profit Corporation" in ac	of Incorporati	on, and fee ss, 607.11	es are submitted to conver 1933 & 607,0202, F.S.	t the follo	owing	eligible
	espondence concerning th						
VISHNU RAMACH							
	Contact Person	<u> </u>					
REIFY TECHNOL	OGIES, INC						
<u> </u>	Firm/Company						
600 ANTILA WAY							
	Address						
SAINT JOHNS, FL	. 32259						
	City. State and Zip Cod	le					
raja@reifytech.com	า						
E-mail address: (to be used for future ann	ual report noti	fication)				
	n concerning this matter	please call: 312		7440			
Name of C	ontact Person	_at (Are:) a Code and	l Daytime Telephone Nun	- nhor		
Enclosed is a check for	the following amount:			relephone (sun	toei		
■ \$105.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 F and Certified		☐S122.50 Filing Fees. Certified Copy, and Certificate of Status	SECTION SECTIO	2023 H	\$1.77.51
Mailing Addr New Filing So Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7		New F Division The Co 2415 N	Address: Filing Section on of Corporations entre of Tallahassee M. Monroe Street, Suite	ENASSEATI	2023 HAR 27 PM 11: 06	

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: REIFY TECHNOLOGIES, INC
Enter Name of the Converting Entity FOR PROFIT CORPORATION 2. The converting entity is a
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.) ILLINOIS first organized, formed or incorporated under the laws of
12/11/2015 (Enter state, or if a non-U.S. entity, the name of the country)
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:
REIFY TECHNOLOGIES, 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: Connot be private at the effective date:
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.

PELLED

2023 MAR 27 PM II: 08

SECRETARY CESTAI

17 MARCH	23	
Signed thisday of		
Signature of Director Officer, or, if Directors or Off	icers have not been selected, an Incorpora	tor:
VISHNU RAMACHANDRAN PRE Printed Name:Title:	SIDENT	
Required Signature(s) on behalf of Converting Flocompanies: [See below for required signature(s).] Signature:	orida partnerships, limited partnership	s, and limited liability
VISHNU RAMACHANDRAN Printed Name:	PRESIDENT Title:	
Signature:		
Printed Name:		
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:		
If Florida General Partnership or Limited Liability Signature of one General Partner.		_
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		2023 HAI SEGRED
All others: Signature of an authorized person.		FILED 2023 MAR 27 PM 11: 06 SECRETARY OF STATE TALLAHASSEE, FL
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)	MIII: 06

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

APTICI E II PRINCIPAL O	::	
The principal place of business/maili	DFFICE ing address is:	
Principal street add	ress Mailing addr	ress, if different is:
600 ANTILA WAY		ess, if different is.
SAINT JOHNS, FL 32259		
ARTICLE III PURPOSE The purpose for which the corporati		
ANY AND ALL LAWFUL BUSI	NESS.	
ARTICLE IV SHARES 1,0 The number of shares of stock is:	00	
The number of shares of stock is: ARTICLE V OFFICERS AND VISHNU RAMACHANI Name and Title: 600 ANTILA WAY	D/OR DIRECTORS DRAN, PRESIDENT Name and Title:	
The number of shares of stock is: ARTICLE V OFFICERS AND VISHNU RAMACHANI Name and Title: 600 ANTILA WAY	D/OR DIRECTORS DRAN, PRESIDENT Name and Title:	
The number of shares of stock is: ARTICLE V OFFICERS AND VISHNU RAMACHANI Name and Title: 600 ANTILA WAY Address: SAINT JOHNS, F	D/OR DIRECTORS DRAN, PRESIDENT Name and Title: Address: Name and Title:	202 72
The number of shares of stock is: ARTICLE V OFFICERS AND VISHNU RAMACHANE Name and Title: 600 ANTILA WAY Address: SAINT JOHNS, F	D/OR DIRECTORS DRAN, PRESIDENT Name and Title: Address: Name and Title:	202 72
The number of shares of stock is: ARTICLE V OFFICERS AND VISHNU RAMACHANE Name and Title: 600 ANTILA WAY Address: SAINT JOHNS, F	D/OR DIRECTORS DRAN, PRESIDENT Name and Title: Address: Name and Title: Address:	202 72

ARTICL	LE VI REGISTERED AGENT	
The name	e and Florida street address (P.O. Box NOT acce	otable) of the registered agent is:
	VISHNU RAMACHANDRAN	the state of the s
Name:		
	600 ANTILA WAY	
Address:		
	SAINT JOHNS, FL 32259	

******	***********	****
Having be	een named as revistered agent to accept service of	process for the above stated corporation at the place designated in
this certifi	icate. I am familiar with and accept the appointment	process for the above stated corporation at the place designated in nt as registered agent and agree to act in this capacity
,	The application and applications	m as registered agent and agree to act in this capacity
	$\sim 10^{-1}$	03/17/2023
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	00/1/12023
	Required Signature/Registered Agent	Date
	* E	17414

E IL ED 2023 HAR 27 PM II: 06 SECRETARY OF STATE