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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

TO: New Filing Section Division of Corporations

SUBJECT: TCOR Consulting Group Inc

Name of Resulting Florida Profit Corporation

The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S.

Please return all correspondence concerning this matter to:

| Thomas Corbett, MAR | |
|--|---------------------------------------|
| Contact Person | |
| TCOR Consulting Group | |
| Firm/Company | |
| 39 Escambia Street | |
| Address | |
| Westville, FL. 32464 | |
| City. State and Zip Code | • |
| thomascorbett@tcorconsulting.co |) |
| E-mail address: (to be used for future annual report no | otification) |
| For further information concerning this matter, please call: | |
| Marcella Spiers, Accounting at (850 | 974-4130 |
| | rea Code and Daytime Telephone Number |
| Enclosed is a check for the following amount: | |

□ \$105.00 Filing Fees □\$113.75 Filing Fees □\$122.50 Filing Fees,

and Certified Copy

Mailing Address:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

and Certificate of

Status

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Certified Copy, and

Certificate of Status

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 Composition Entire immediately minutes the Silver Substitution of the Composition Entire immediately minutes the Silver Substitution of the Substit |
|--|
| 1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is: TCOR Consulting Group 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 US |
| (Enter state, or if a non-U.S. entity, the name of the country) |
| on March 31,2017 |
| 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> : TCOR Consulting Group 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: January 1, 2023 |
| 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 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. |
| |
| |
| |

| Signed this 14th day of February | | |
|--|--|-----------------------|
| Required Signature for Florida Profit Corporation | <u>on:</u> | |
| Signature of Director Afficer for, if Day ors or Off | icers have not been selected, an Incorporato | r: |
| Printed Name: Thomas Corbett Title: Y | 1GR | |
| Required Signature(s) on behalf of Converting Fl. | | and limited liability |
| | | |
| Printed Name: Thomas Corbett | Title. MGR | |
| Signature: | · | _ - |
| Printed Name: | | |
| Signature: | | _ |
| Printed Name: | Title: | <u></u> |
| Signature: | | |
| Printed Name: | Title: | _ |
| Signature: | · · · · · · · · · · · · · · · · · · · | _ |
| Printed Name: | Title: | _ |
| Signature: | | _ |
| Printed Name: | Title: | <u></u> |
| If Florida General Partnership or Limited Liabilit Signature of one General Partner. | ty Partnership: | |
| If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners. | y Limited Partnership: | |
| If Florida Limited Liability Company: Signature of a Member or Authorized Representative | | |
| All others: Signature of an authorized person. | | 2023 MAR |
| 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) | AR 20 AP H |

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

| RTICLE | II PRINCIPAL OFFICE | | |
|--|---|--|--|
| | l place of business/mailing address is: | | |
| | Principal street address | Mailing addre | ss, if different is: |
| 39 Es | cambia Street | - | |
| Vestv | ville, FL. 32464 | | |
| RTICLE | | | |
| | for which the corporation is organized is: | lin the Oteta of E | l = ::! =! = |
| <u>Jpera</u> | ite "for profit business" | in the State of F | iorida |
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| RTICLE : | IV SHARES 10 | | |
| RTICLE : | IV SHARES 10 | | |
| | | 8 | |
| RTICLE | V OFFICERS AND/OR DIRECTORS | | |
| ARTICLE | v officers and/or directors itle: Thomas Corbett, | S Name and Title: | |
| Name and T | V OFFICERS AND/OR DIRECTORS | Name and Title: | |
| RTICLE | v officers and/or director: Thomas Corbett, 39 Escambia St | | |
| ARTICLE | v officers and/or directors itle: Thomas Corbett, | Name and Title: | |
| Name and T | v officers and/or directors Thomas Corbett, 39 Escambia St Westville, FL. 32464 | Name and Title:Address: | 2 |
| Name and T | v officers and/or director: Thomas Corbett, 39 Escambia St | Name and Title:Address: | 2 |
| ame and T ddress: | v officers and/or directors Thomas Corbett, 39 Escambia St Westville, FL. 32464 | Name and Title: Address: Name and Title: | |
| ATICLE ame and Toddress: | v officers and/or directors itle: Thomas Corbett, 39 Escambia St Westville, FL. 32464 itle: | Name and Title: Address: Name and Title: | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |
| lame and Taddress: | v officers and/or directors itle: Thomas Corbett, 39 Escambia St Westville, FL. 32464 itle: | Name and Title: Address: Name and Title: | 27 17 27 27 27 |
| Name and Toddress: | v officers and/or directors itle: Thomas Corbett, 39 Escambia St Westville, FL. 32464 itle: | Name and Title: Address: Name and Title: Address: | |
| Name and Total Address: Name and Total Address: | v officers and/or directors itle: Thomas Corbett, 39 Escambia St Westville, FL. 32464 itle: | Name and Title: Address: Name and Title: Address: | |

| ARTICL | E VI REGISTERED AGENT |
|----------|--|
| The name | and Florida street address (P.O. Box NOT acceptable) of the registered agent is: |
| Name: | Thomas Corbett |
| Address: | 39 ESCAMBIA St |
| | West V:11e, FL 32464 |
| | , |
| | |

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

3 - 20 - 23 Date

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