(Requestor's Name)		
(Address)		
(Add	ress)	
(City	/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
14236008	6390	

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2023 JUN 20 成 片 32 RECEIVED

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 06/20/2023	-		⇔WALK IN⇔
ENTITY NAME Finance	ial Planning Solvetors	,INC.	
DOCUMENT NUMBER_			
	PLEASE FILE THE A	ATTACHED AND RETURN	
xxxxxx	Plain Copy Certified Copy		
	Certificate of Status		
*** ***	PLEASE OBTAIN THE FOLL	OWING FOR THE ABOVE ENTITY**	
*	Certified Copy of Arts &		
	Certificate of Good Standing	TARIAL CERTIFICATION**	
COUNTRY OF DESTINAT NUMBER OF CERTIFICA	TION		
TOTAL OWED \$105		ACCOUNT #: I201600000	72
		E 8 FM	, ,
Please call Tina at t	the above number for any	y issues or concerns. Thank you	so much!



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 20, 2023

SUNSHANG STATE CORPORATE COMPLIANCE COMPLANY

SUBJECT: FINANCIAL PLANNING SERVICES, INC.

Ref. Number: W23000086390

CORRECTED
Please Allow For Same File Date

We have received your document for FINANCIAL PLANNING SERVICES, INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is 539578.

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: 923A00013948



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: Financial Planning Services, Inc.
Enter Name of the Converting Entity
Incorporation
2. The converting entity is a
(Enter entity type. Example: limited liability company, limited partnership,
general partnership, common law or business trust, etc.) North Carolina
first organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
06/03/91
on 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> : Financial Planning Solutions, 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 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.

2023 JUN 20 PH 5: 40
SECRETARY OF STATE

Signed thisday of	Jun 12 2023 14:37	PDT, 20	
Required Signature for Florida Pro	ofit Corporation:		
Signature of Director, Officer, or, if I Kelly G. Burke			
Kelly Burke Printed Name:	DirectorTitle:		_
Required Signature(s) on behalf of companies: [See below for required	f Converting Florida p l signature(s).]	partnerships, limited partne	rships, and limited liability
Signature: Kelly Burke			
Printed Name: Kelly Burke	Ti	itle: Director	
Signature:			
Printed Name:	T	itle:	
Signature:			
Printed Name:	T	itle:	
Signature:			
Printed Name:	Т	itle:	
Signature:			
Printed Name:	T	itle:	
Signature:			
Printed Name:	T	itle:	
If Florida General Partnership or Signature of one General Partner.	Limited Liability Par	t <u>nership:</u>	
If Florida Limited Partnership or Signatures of ALL General Partners	Limited Liability Lim	nited Partnership:	
If Florida Limited Liability Comp Signature of a Member or Authorize			207 : Seco
All others: Signature of an authorized person.			FILL 2023 JUN 20 SEORE IARY
Fees: Articles of Conversion: Fees for Florida Articles of Certified Copy: Certificate of Status:	Incorporation: \$7	35.00 70.00 3.75 (Optional) 3.75 (Optional)	FILED 123 JUN 20 PH 5: 41 FARE TARY OF STATE TALL KITASSEE, FL

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

RTICLE II PRINCIPAL OFFICE		
ne principal place of business/mailing address is:		
Principal street address	Mailing addr	ess, if different is:
0 SE 12th St, Pompano Beach, FL 33060		
RTICLE III PURPOSE ne purpose for which the corporation is organized is:		
•		
any legal purpose		
	·	
	<u> </u>	
DTICLE TU SUADES		
RTICLE IV SHARES the number of shares of stock is:	100,000	
ne number of shares of stock is:		
ne number of shares of stock is: RTICLE V OFFICERS AND/OR DIRECTO		
ne number of shares of stock is: RTICLE V OFFICERS AND/OR DIRECTO Kelly Burke, Director	RS	
RTICLE V OFFICERS AND/OR DIRECTO Kelly Burke, Director	RS Name and Title:	
RTICLE V OFFICERS AND/OR DIRECTO Kelly Burke, Director ame and Title: 360 SE 12th St, Pompano Beach	RS Name and Title:	
RTICLE V OFFICERS AND/OR DIRECTO Kelly Burke, Director ame and Title: 360 SE 12th St, Pompano Beach	RS Name and Title:	
RTICLE V OFFICERS AND/OR DIRECTO Kelly Burke, Director ame and Title: 360 SE 12th St, Pompano Beach	RS Name and Title: Address:	
RTICLE V OFFICERS AND/OR DIRECTO Kelly Burke, Director ame and Title: 360 SE 12th St, Pompano Beach ddress: FL, 33060	RS Name and Title: Address:	
RTICLE V OFFICERS AND/OR DIRECTO Kelly Burke, Director ame and Title: 360 SE 12th St, Pompano Beach ddress: FL, 33060 ame and Title:	Name and Title: Address: Name and Title:	2823 SEC
RTICLE V OFFICERS AND/OR DIRECTO Kelly Burke, Director ame and Title: 360 SE 12th St, Pompano Beach ddress: FL, 33060 ame and Title:	Name and Title: Address: Name and Title:	2823 SEC
RTICLE V OFFICERS AND/OR DIRECTO Kelly Burke, Director ame and Title: 360 SE 12th St, Pompano Beach ddress: FL, 33060 ame and Title:	Name and Title: Address: Name and Title:	2023 SECT YA
RTICLE V OFFICERS AND/OR DIRECTO Kelly Burke, Director ame and Title: 360 SE 12th St, Pompano Beach ddress: FL, 33060	RS Name and Title: Address: Name and Title: Address:	2023 JUN 20 Secretary Tallahas
ame and Title: 360 SE 12th St, Pompano Beach ddress: FL, 33060 Jame and Title:	Name and Title: Address: Name and Title: Address:	2023 JUN 20 PM SECRETARY OF TALLAHASSE
RTICLE V OFFICERS AND/OR DIRECTO Kelly Burke, Director ame and Title: 360 SE 12th St, Pompano Beach ddress: FL, 33060 ame and Title: address:	Name and Title: Address: Name and Title: Address: Name and Title: Name and Title:	SECRETARY OF STALL AHASSEE.
RTICLE V OFFICERS AND/OR DIRECTO Kelly Burke, Director amc and Title: 360 SE 12th St, Pompano Beach ddress: FL, 33060 ame and Title:	Name and Title: Address: Name and Title: Address: Name and Title: Name and Title:	2023 JUN 20 PM SECRETARY OF TALLAHASSE

ARTICL	E VI REGISTERED AGENT	
The name	e and Florida street address (P.O. Box NOT accepta	ble) of the registered agent is:
<u></u>	Kelly Burke	
Name:	<u> </u>	
	360 SE 12th St	
Address:		
	Pompano Beach, FL 33060	
*******	*************	********
		ocess for the above stated corporation at the place designated in
this certif	icate, I am familiar with and accept the appointment	as registered agent and agree to act in this capacity
	// 0 .0 .	
	Kelly G Burke	Jun 1 <u>2 2023 14:37 P</u> DT
	Required Signature/Registered Agent	Date

. . . .

FILED
2023 JUN 20 PM 5: 41
SECRETARY OF STATE