PR3111WS953/

(R€	equestor's Name)
(Ác	ddress)
(Ac	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:





500412799235

07/26/23--01021--008 **122.50



COVER LETTER

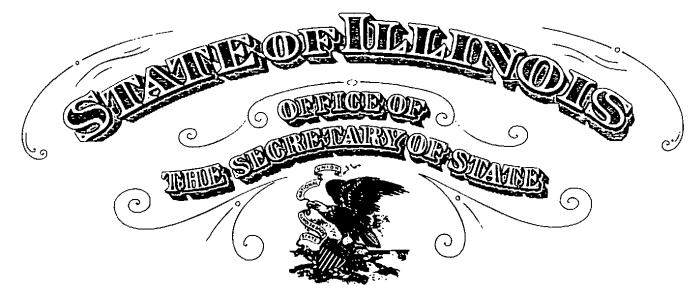
TO: New Filing Sec Division of Cor						
SUBJECT: ZARAC	GON, INC.					
	Name of	Resulting Floric	la Profit (Corporation	_	
	f Conversion, Articles or ofit Corporation" in according	•		are submitted to convert 33 & 607.0202, F.S.	the following eligi	ible
Please return all corresp	ondence concerning this	s matter to:				
Mitchell T. Mc	Rae, Esq.					
	Contact Person		_			
McRae Law C	Offices, P.A.	_	_			
	Firm/Company					
5300 W. Atlar	itic Ave., Suite	412	_			
	Address					
Delray Beach	, FL 33484					
	City, State and Zip Code	e				
mmcrae@mci	raelawfirm.com	1				
E-mail address: (t	o be used for future annu	ual report notific	cation)			
For further information	concerning this matter.	please call:				
Mitchell T. Mo	Rae	_{at (} 561	,638	3-6600 (Ext. 1)		
Name of Co	ontact Person		Code and	l Daytime Telephone Nu	mber	
Enclosed is a check for	the following amount:					
□ \$105.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Fill and Certified G	-	■\$122.50 Filing Fees. Certified Copy, and Certificate of Status		
<u>Mailing Addr</u> New Filing Se				Address: Filing Section	202	
Division of Co				on of Corporations	2023 JUL 26 810	_
P.O. Box 632				entre of Tallahassee	<u> </u>	(CES
Tallahassee, F	FL 32314			N. Monroe Street, Suite nassee, FL 32303	810 PH 2: 0;	
					. O.	4

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 <u>eligible</u> <u>business entity into a Florida Profit Corporation</u> in accordance with ss. 607.11933 & 607.0202, Florida Statutes.



Signed	this 13 day of July	. 20 23	
	V		
	ed Signature for Florida Profit Corporation:		
Signatu	re of Director, Othicor, of in Directors of Office	<u> </u>	or:
Printed	Name: RICHARD M. PERLMAN Title: PRE	SIDENT	
Requir	ed Signatures) on behalf of Converting Flurnies: [See below for required signature(s).]	ida partnerships, limited partnerships,	and limited liability
Signati	nies: [See below for required sternature(s).] Line:	~~ <u> </u>	_
Printed	Name RICHARD M. PERLMAN	N Title: PRESIDENT	
Signatu	alt		
_	Name: LISA K. MINER		- -
Signatu	ıre:		<u> </u>
Printed	Name:	Title:	_
Signatu	ire:		_
Printed	Name:	Title:	_
Signati	ire:		
Printed	Name:	Title:	
Signatu	ire:		
Printed	Name:	Title:	
	ida General Partnership or Limited Liability are of one General Partner.	Partnership:	
	ida Limited Partnership or Limited Liability ares of ALL General Partners.	Limited Partnership:	20 ₂
	ida Limited Liability Company: ure of a Member or Authorized Representative.		2023 JUL 26 PH 2: 07
All oth Signatu	ers: are of an authorized person.		PH TT
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)	:07



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the

Department of Business Services. I certify that

ZARAGON, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON APRIL 23, 1998, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 26TH

day of

JUNE

A.D.

2023

Authentication #: 2317700254 verifiable until 06/26/2024

Authenticate at: https://www.ilsos.gov

Alexi Gianarul

ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

	PRINCIPAL OFFICE		
The principal p	place of business/mailing address is:		
	Principal street address	M	failing address, if different is:
300 W. Atlantic A	ve., Suite 412, Delray Beach, Ft. 33484		
	·		
RTICLE II			
	or which the corporation is organized is:		AssessA serviced all lac
	ose for which this corporation is o	-	· · · · · · · · · · · · · · · · · · ·
business	for which corporations may be in	corporated un	nder the "Florida Busine
Corporatio	n Act", Chapter 607, Florida Statut	es, as now exis	sts or may after be amend
ARTICLE V	SHARES f shares of stock is: OFFICERS AND/OR DIRECTORS RICHARD M. PERLMAN, PRESIDENT	ized no par v	alue common shares
	OFFICERS AND/OR DIRECTORS le: RICHARD M. PERLMAN, PRESIDENT	ized no par v	
ARTICLE V	OFFICERS AND/OR DIRECTORS le: RICHARD M. PERLMAN, PRESIDENT 5300 W. ATLANTIC AVE., SUITE 412		
ARTICLE V	OFFICERS AND/OR DIRECTORS le: RICHARD M. PERLMAN, PRESIDENT	Name and Title:_	
ARTICLE Name and Tit	OFFICERS AND/OR DIRECTORS RICHARD M. PERLMAN, PRESIDENT 5300 W. ATLANTIC AVE., SUITE 412 DELRAY BEACH, FL 33484 LISA K. MINER, SECRETARY	Name and Title:_ Address:	
ARTICLE Mame and Tit Address: Name and Tit	OFFICERS AND/OR DIRECTORS RICHARD M. PERLMAN, PRESIDENT 5300 W. ATLANTIC AVE., SUITE 412 DELRAY BEACH, FL 33484 LISA K. MINER, SECRETARY	Name and Title:_ Address:	
ARTICLE ANAME and Tite Address:	OFFICERS AND/OR DIRECTORS RICHARD M. PERLMAN, PRESIDENT 5300 W. ATLANTIC AVE., SUITE 412 DELRAY BEACH, FL 33484 LISA K. MINER, SECRETARY	Name and Title:_ Address: Name and Title:_	
ARTICLE Mame and Tit Address: Name and Tit Address:	OFFICERS AND/OR DIRECTORS RICHARD M. PERLMAN, PRESIDENT 5300 W. ATLANTIC AVE., SUITE 412 DELRAY BEACH, FL 33484 LISA K. MINER, SECRETARY 875 N MICHIGAN AVE #3840 CHICAGO, IL 60611	Name and Title:_ Address: Name and Title:_ Address:	TOLL TOLL OF STATE
ARTICLE Mame and Tit Address: Name and Tit Address:	OFFICERS AND/OR DIRECTORS RICHARD M. PERLMAN, PRESIDENT 5300 W. ATLANTIC AVE., SUITE 412 DELRAY BEACH, FL 33484 LISA K. MINER, SECRETARY 875 N MICHIGAN AVE #3840	Name and Title:_ Address: Name and Title:_ Address:	

ARTICLE VI REGISTERED AGENT

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

Name:

McRae Law Offices, P.A.

Address:

5300 W. Atlantic Ave., Suite 412

Delray Beach, FL 33484

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

FILED
2023 JUL 26 PM 2:0