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COVER LETTER

Division of Corporations					
SUBJECT: IT'S SNV TECHNOLO	GIES, IN	C.			
	Resulting Flori	da Profit	Corporation		
The enclosed Articles of Conversion, Articles of entity into a "Florida Profit Corporation" in acco				the following e	ligible
Please return all correspondence concerning this	matter to:				
Laurie A. Caluwaert					
Contact Person					
		_			
Firm/Company					
1314 E Las Olas Blvd # 2654					
Address					
Fort Lauderdale, Fl 33301		_			
City, State and Zip Code	•	_			
Laurie@Snverified.Com		_			
E-mail address: (to be used for future annu	ial report notifi	cation)			
For further information concerning this matter, p					
Laurie A. Caluwaert	_at (754	<u>)</u> 214	-4806		
Name of Contact Person	Area	Code and	Daytime Telephone Num	nber	
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	_	■\$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		New F Divisi The C 2415 I	Address: Ciling Section on of Corporations entre of Tallahassee N. Monroe Street, Suite assee, FL 32303	810 17 7- 2111 8: 51	TO

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.

ITIC CNIVITECUNIOLOGIES LLC	s:	
IT'S SNV TECHNOLOGIES, LLC		
Enter Name of the Converting Entity	· '	
2. The converting entity is a LLC		
(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)		
(Einer state, or if a non-0.3, entity, the name of the country)		
on 03/25/2021		
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	<u>n:</u>	
IT'S SNV TECHNOLOGIES, INC.		
Enter Name of Florida Profit Corporation		
4. This conversion was approved by the eligible converting entity in accordance with this chapter an current/organic jurisdiction.	d the laws of i	ts
09/04/2022		
5. If not affective on the data of filing, anter the affective data: UO/U4/ZUZ3		
5. If not effective on the date of filing, enter the effective date: 08/04/2023 (The effective date: Cannot be prior to nor more than 90 days after the date this document is to	filed by the Fl	lorida
Or the effective date: Cannot be prior to nor more than 90 days after the date this document is to Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the listed as the document's effective date on the Department of State's records.	is date will no	t be ②
Or the effective date: Cannot be prior to nor more than 90 days after the date this document is to Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the listed as the document's effective date on the Department of State's records.	is date will no	t be ②
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Or the effective date: Cannot be prior to nor more than 90 days after the date this document is to Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the listed as the document's effective date on the Department of State's records.	is date will no	t be ②

Signed this 04 day of AUGUST	2023	
Required Signature for Florida Profit Corporation:		
Signature of Director, Officer, or, if Directors or Officer	rs have not been selected, an Incorporato	r:
Printed Name: Laurie A. Caluw Title: CEO	/ Managing Member	
Required Signature(s) on behalf of Converting Floricompanies: [See below for required signature(s).]	da partnerships, limited partnerships,	and limited liability
Signature: Aug Alask		_
Printed Name: Laurie A. Caluwaert	_ _{Title:} CEO	_
Signature:		_
Printed Name:	_ Title:	_
Signature:		_
Printed Name:	_ Title:	_
Signature:		
Printed Name:		<u></u>
Signature:		_
Printed Name:	Title:	_
Signature:		_
Printed Name:	_ Title:	_
If Florida General Partnership or Limited Liability Signature of one General Partner.	<u>Partnership:</u>	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	Limited Partnership:	6
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		2023 1.05 - 7
All others: Signature of an authorized person.		7
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)	MI 8:51

ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION

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

ARTICLE I The name of the	NAME IT'S SNV TEC	HNOLOGI	ES, INC	
ARTICLE II				
	Principal street address			rent is:
1314 E L	as Olas Blvd #2654	·		
Fort Lau	derdale, Fl 33301			
ARTICLE II The purpose f	or which the corporation is organized is:			
			· · · · · · · · · · · · · · · · · · ·	202
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ARTICLE I	V SHARES f shares of stock is: 10,000,000.00			ATE 1
ARTICLE V				
	Laurie A. Caluwaert CEO	Name and Title	Donald Kelly V	/.P.
Address:	1151 N Fort Lauderdale Be		7057 Southhamp	
C70 + 184	Fort Lauderdale, Fl 33304		West Chester,	Oh 45069
Name and Tit		Name and Title	::	
Address:	506 Washington St.	Address:		
	Buffalo, Ny 14203			
Name and Tit	le:	Name and Title	::	
Address:	 	Address:		_ .
	<u></u>			

ARTICLE VI REGISTERED AGENT

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

Name:

Laurie A. Caluwaert

Address:

1151 N Fort Lauderdale

Fort Lauderdale, Fl 33304

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