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#### **COVER LETTER**

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:  Anthony Morales  Contact Person  MyUSACorporation.com  Firm/Company  1 Radisson Plaza, Suite 800  Address  New Bochelle, ny 10801  City. State and Zip Code  nto@myusacorporation.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Anthony Morales  at ( 877  )330-2677  Name of Contact Person  Area Code and Daytime Telephone Number  Enclosed is a check for the following amount:  \$\frac{1}{2}\$	TO: New Filing Section Division of Corporations				
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:  Anthony Morales  Contact Person  MyUSACorporation.com  Firm/Company  1 Radisson Plaza, Suite 800  Address  New Bochelle, ny 10801  City. State and Zip Code  nto@myusacorporation.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Anthony Morales  at ( 877  )330-2677  Name of Contact Person  Area Code and Daytime Telephone Number  Enclosed is a check for the following amount:  \$\frac{1}{2}\$	SUBJECT: ARDENT DOVETAIL INC.				
Please return all correspondence concerning this matter to:  Anthony Morales  Contact Person  MyUSACorporation.com  Firm/Company  1 Radisson Plaza, Suite 800  Address  New Rochelle, ny 10801  City. State and Zip Code  Info@myusacorporation.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Anthony Morales  at (877 )330-2677  Name of Contact Person  Enclosed is a check for the following amount:  \$\frac{1}{2}\$		Resulting Flor	ida Profit	Corporation	
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Firm/Company  1 Radisson Plaza, Suite 800  Address  New Rochelle, ny 10801  City. State and Zip Code  nlo@myusacorporation.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Anthony Morales  at ( 877	Contact Person		<del></del>	•	
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Address  New Rochelle, ny 10801  City. State and Zip Code  Info@myusacorporation.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Anthony Morales  at ( 877  )330-2677  Name of Contact Person  Area Code and Daytime Telephone Number  Enclosed is a check for the following amount:  Stock for the following amount:  Street Address: New Filing Section  New Filing Section	Firm/Company				
City. State and Zip Code    City. State and Zip Code	1 Radisson Plaza, Suite 800				
City, State and Zip Code  nfo@myusacorporation.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Anthony Morales  at ( 877 )330-2677  Name of Contact Person  Area Code and Daytime Telephone Number  Enclosed is a check for the following amount:  Street Address:  New Filing Section  City, State and Zip Code  Antification  ### Antification  ### Antification  ### Antification  ### Antification  ### Antification  ### Antification  #### Antification  ###################################	Address				
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□ \$105.00 Filing Fees □ \$113.75 Filing Fees and Certified Copy and Certificate of Status    Mailing Address:   Street Address: New Filing Section   New Filing Section   Status   Street Address: New Filing Section   Status   St	Name of Contact Person		Code and	Daytime Telephone Number	
and Certificate of and Certified Copy Certified Copy, and Status Certificate of Status  Mailing Address:  New Filing Section  Street Address: New Filing Section	Enclosed is a check for the following amount:				
New Filing Section New Filing Section			~	Certified Copy, and	
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$\cdot$	Division of Corporations		Division of Corporations		
	P.O. Box 6327 Tallahassoc El 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

# 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:
ARDENT DOVETAIL 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
(Enter state, or if a non-U.S. entity, the name of the country)
on_05/05/2021
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> ARDENT DOVETAIL 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.

Signed thisday ofSeptember	, 20 <u>23</u> .
Required Signature for Florida Profit Corporation:	
Signature of Director, Officer, or, if Directors or Office	ers have not been selected, an Incorporator
Trelli Must	
Printed Name: Shella Aqueel Title: Presider	nt .
Required Signature(s) on behalf of Converting Floricompanies: [See below for required signature(s).]	ida partnerships, limited partnerships, and limited liability
Signature: Telle Agreed	
Printed Name: Shella Aqueel	Title: Member
Signature:	<del></del>
Printed Name:	Title:
Signature:	
Printed Name:	
Signature:	
Printed Name:	Title:
Signature:	<del></del>
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida General Partnership or Limited Liability Signature of one General Partner.	Partnership:
If Florida Limited Partnership or Limited Liability	Limited Partnership:
Signatures of ALL General Partners.	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	
All others: Signature of an authorized person.	
Fces:	
Articles of Conversion:	\$35.00
Fees for Florida Articles of Incorporation: Certified Copy:	\$70.00 \$8.75 (Ontional)
Certificate of Status:	\$8.75 (Optional) \$8.75 (Optional)

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

ARTICLE The princip				
	II PRINCIPAL OFFICE al place of business/mailing address is:			
	•			
	Principal street address		Mailing address, if different is:	
12364 82nd S	St N			
West Palm B	each, FL 33412	<u> </u>		
	III PURPOSE			
The purposi	e for which the corporation is organized	is:		
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	IV SHARES 1 of shares of stock is:			
The number	of shares of stock is:	<u>rors</u>		
The number	of shares of stock is:		itle:Shella Aqueel, Treasurer	
The number	of shares of stock is:  V OFFICERS AND/OR DIRECT		itle: Shella Aqueel, Treasurer 12364 82nd St N	
The number  ARTICLE  Name and T	of shares of stock is:  V OFFICERS AND/OR DIRECT  Title: Shella Aqueel, President	Name and T		
The number  ARTICLE  Name and T  Address:	V OFFICERS AND/OR DIRECT  Title: Shella Aqueel, President  12364 82nd St N  West Palm Beach, FL 33412	Name and T Address:	12364 82nd St N West Palm Beach, FL 33412	
The number  ARTICLE  Name and T  Address:	V OFFICERS AND/OR DIRECT  Title: Shella Aqueel, President  12364 82nd St N  West Palm Beach, FL 33412  Title: Shella Aqueel, Vice-President	Name and T Address:	12364 82nd St N  West Palm Beach, FL 33412  itle:	
The number  ARTICLE  Name and T  Address:	V OFFICERS AND/OR DIRECT  Title: Shella Aqueel, President  12364 82nd St N  West Palm Beach, FL 33412	Name and T Address:	12364 82nd St N West Palm Beach, FL 33412	2022 Si
The number  ARTICLE  Name and Taddress:  Name and Taddress:	V OFFICERS AND/OR DIRECT  Title: Shella Aqueel, President  12364 82nd St N  West Palm Beach, FL 33412  Title: Shella Aqueel, Vice-President	Name and T Address: Name and T	12364 82nd St N  West Palm Beach, FL 33412  itle:	2022 SE: 1
The number  ARTICLE  Name and The Address:  Name and The Address:	V OFFICERS AND/OR DIRECT  Title: Shella Aqueel, President  12364 82nd St N  West Palm Beach, FL 33412  Title: Shella Aqueel, Vice-President  12364 82nd St N  West Palm Beach, FL 33412	Name and T Address: Name and T	12364 82nd St N  West Palm Beach, FL 33412  itle:	7022 SET 19
The number  ARTICLE  Name and The Address:  Name and The Address:	V OFFICERS AND/OR DIRECT  Title: Shella Aqueel, President  12364 82nd St N  West Palm Beach, FL 33412  Title: Shella Aqueel, Vice-President  12364 82nd St N	Name and T Address: Name and T	12364 82nd St N  West Palm Beach, FL 33412  itle:	
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The number  ARTICLE  Name and The Address:  Name and The Address:  Name and The Address:	V OFFICERS AND/OR DIRECT  Title: Shella Aqueel, President  12364 82nd St N  West Palm Beach, FL 33412  Title: Shella Aqueel, Vice-President  12364 82nd St N  West Palm Beach, FL 33412	Name and T Address: Name and T Address: Name and T Name and T	itle:	

#### 

Date

Required Signature/Registered Agent

## SPECIAL AND REVOCABLE LIMITED POWER OF ATTORNEY

TO ALL PERSONS, be it known, that INCORP SERVICES, INC., a Nevada corporation ("Grantor"), does hereby make and grant a limited and specific power of attorney to Anthony Morales and appoint and constitute said individual as its attorney-in-fact ("Attorney-in-Fact"). This Special and Revocable Limited Power of Attorney hereby revokes any and all former powers of attorney given by Grantor to Attorney-in-Fact.

Attorney-in-Fact shall have the limited power and authority to undertake, commit and perform only the following acts on Grantor's behalf to the same extent as if Grantor had done so personally, all with full power of substitution and revocation in the presence:

Authority to accept appointment as registered agent on behalf of Grantor, for entities which MyUSACorporation.com, a Wyoming corporation, has purchased resident agent service on or through their account with Grantor. After each exercise of such authority, Attorney-in-Fact shall notify Grantor of the same.

TERMINATION: Unless sooner revoked or terminated by Grantor, this Special and Revocable Limited Power of Attorney shall become NULL and VOID from and after December 31st, 2023.

Louise Breytenbach, Chie	f Operating Officer	Dated: January 10 <sup>th</sup> , 2023
STATE OF NEVADA	)	
COUNT OF CLARK	) ss )	

This Special and Revocable Limited Power of Attorney was acknowledged before me on January 10<sup>th</sup>, 2023, by Louise Breytenbach, as Chief Operating Officer of InCorp Services, Inc., a Nevada corporation.

Notary Public, State of Novada

Notary Public in the State of Nevada

My Commission Expires: June 10, 2025