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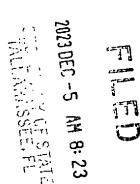
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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12:05/28--11028--008 **:09.00





COVER LETTER

TO: New Filing Section Division of Corporations			
YM EUSION INC			
	Resulting Florida P	rofit Corporation	
The enclosed Articles of Conversion, Articles of entity into a "Florida Profit Corporation" in account	f Incorporation, and ordance with ss. 60	d fees are submitted to convert the 7.11933 & 607.0202, F.S.	e following eligible
Please return all correspondence concerning this	s matter to:		
MARK DIONNE			
Contact Person			
INTEGRAL TAX			
Firm/Company			
16855 W BERNARDO DR	STE 370		
Address			
SAN DIEGO, CA 92127	,		
City, State and Zip Code	2		
MARK@INTEGRALTAX	K.COM_		
E-mail address: (to be used for future annu		on)	
For further information concerning this matter.		487-4239	
MARK DIONNE Name of Contact Person	_ar (<u> </u>	le and Daytime Telephone Numb	er 🛌
	Area Coe	te and Daytime Telephone (Valido	1023
Enclosed is a check for the following amount:			E C
■ \$105.00 Filing Fees □\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filing and Certified Cop		Alliasses
Mailing Address:		Street Address:	8: 23 STATE E, FL
New Filing Section Division of Corporations		New Filing Section Division of Corporations	「 元 。
P.O. Box 6327		he Centre of Tallahassee	

Tallahassee, FL 32314

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.

Signed this 22nd day of NOVEMBER	R 2023
Required Signature for Florida Profit Corporation:	
Signature of Director, Officer, or, if Directors or Officer	's have not been selected, an incorporator:
Signature of Director, Officer or, it Directors in Officer	
Printed Name: Christopher Shaughnessy Title:)
Required Signature(s) on behalf of Converting Floricompanies: [See below for required signature(s).]	da partnerships, limited partnerships, and limited liability
Signature:	
Printed Name:	
Signature:	
Printed Name:	
Signature:	
Printed Name:	_ Title:
Signature:	
Printed Name:	Title:
Signature:	
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 Signatures of ALL General Partners.	Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	
All others: Signature of an authorized person.	
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)

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

The principal place of business/mailing address is:				
Principal street address	Mail	ing address, if di	fferent is:	
275 Jellison Rd				
St Augustine, FL 32080			-20	
The purpose for which the corporation is organized is:				
<u>.</u>				
he number of shares of stock is: 1,000,000			2023 DEC	
RTICLE V OFFICERS AND/OR DIRECTORS			ANZ3 DEL TO	- -
RTICLE V OFFICERS AND/OR DIRECTORS	Name and Title:			元
ame and Title: Christopher Shaughnessy, CEO				'n
rand Title: Christopher Shaughnessy, CEO	Name and Title:			元
ARTICLE V OFFICERS AND/OR DIRECTORS Same and Title: Christopher Shaughnessy, CEO 275 Jellison Rd St Augustine, FL 32080	Name and Title: Address:		SSEE FL	元
ARTICLE V OFFICERS AND/OR DIRECTORS Same and Title: Christopher Shaughnessy, CEO 275 Jellison Rd St Augustine, FL 32080 Same and Title:	Name and Title: Address: Name and Title:		SSEE FL	5 AM 8: 23
Christopher Shaughnessy, CEO Address: Christopher Shaughnessy, CEO 275 Jellison Rd St Augustine, FL 32080 Same and Title:	Name and Title: Address: Name and Title: Address:		STEE FL	5 AM 8: 23
Name and Title: Christopher Shaughnessy, CEO 275 Jellison Rd St Augustine, FL 32080 Same and Title: Address:	Name and Title: Address: Name and Title: Address:		SSEE. FL	5 AM 8: 23

ARTICL The name	E VI REGISTERED AGENT and Florida street address (P.O. Box NO	FT acceptable) of the registered agent is:
Name:	Christopher Shaughnessy	_
Address:	275 Jellison Rd	_
Administra	St Augustine, FL 32080	
Having be this certifi	cen named as registered agent to accept so icate, I am familiar with and accept the ap	ervice of process for the above stated corporation at the place designated in oppointment as registered agent and agree to act in this capacity 11/22/2023 Date



Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name: XM FUSION, INC.

Entity No.: 2588440 Registration Date: 02/17/2005

Entity Type: Stock Corporation - CA - General

Formed In: CALIFORNIA

Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of November 22, 2023.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 161014519

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.