

Priority

(Requestor's Name) _____

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(City/State/Zip/Phone #) _____

PICK-UP WAIT MAIL

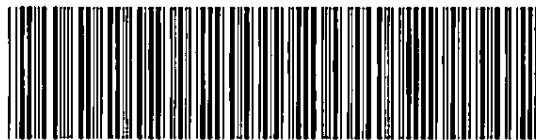
(Business Entity Name) _____

(Document Number) _____

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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Filing Cover Sheet

To: Florida Division of Corporations

From: LESLIE SELLERS C/O Capitol Services, Inc.

Date: 12/28/2023

Trans#: 1428824

Entity Name: LATITUDE NETWORK CONSULTING, INC.

Articles of Incorporation ()

Amendment ()

Articles of Dissolution ()

Annual Report ()

Conversion (XXX)

Fictitious Name ()

Foreign Qualification ()

Limited Liability ()

Limited Partnership ()

Merger ()

Reinstatement ()

Withdrawal / Cancellation ()

Other ()

Partnership Registration ()

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FILING DATE
TALLAHASSEE FLORIDA
STATE OF FLORIDA
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STATE FEES PREPAID WITH CHECK # 3673 FOR \$105.00

PLEASE RETURN:

Certified Copy () Plain Stamped Copy (XXX)

500 date
10274

Good Standing () Certificate of Fact ()



Filing Cover Sheet

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Entity Name: LATITUDE NETWORK CONSULTING, INC.

Articles of Incorporation (<input type="checkbox"/>)	Amendment (<input type="checkbox"/>)
Articles of Dissolution (<input type="checkbox"/>)	Annual Report (<input type="checkbox"/>)
Conversion (XXX)	Fictitious Name (<input type="checkbox"/>)
Foreign Qualification (<input type="checkbox"/>)	Limited Liability (<input type="checkbox"/>)
Limited Partnership (<input type="checkbox"/>)	Merger (<input type="checkbox"/>)
Reinstatement (<input type="checkbox"/>)	Withdrawal / Cancellation (<input type="checkbox"/>)
Other (<input type="checkbox"/>)	Partnership Registration (<input type="checkbox"/>)

STATE FEES PREPAID WITH CHECK # 3673 FOR \$105.00

PLEASE RETURN:

Certified Copy () Plain Stamped Copy (XXX)

Good Standing () Certificate of Fact ()

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Latitude Network Consulting, Inc.

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:

Thomas R Hagstrom Jr

Contact Person

Latitude Network Consulting, Inc.

Firm/Company

11860 Aldendale Street

Address

Orlando, FL 32836

City, State and Zip Code

thagstrom@latitudenc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas R Hagstrom Jr at (714) 858-1733
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

\$105.00 Filing Fees \$113.75 Filing Fees \$113.75 Filing Fees \$122.50 Filing Fees,
and Certificate of and Certified Copy Certified Copy, and
Status Certificate of Status

Mailing Address:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

New Filing Section
Division of Corporations
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:

Latitude Network Consulting, Inc.

Enter Name of the Converting Entity

S Corporation

2. The converting entity is a

(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)

California

first organized, formed or incorporated under the laws of

(Enter state, or if a non-U.S. entity, the name of the country)

on 04/07/2003

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**:

Latitude Network Consulting, 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.

01/01/2024

5. If not effective on the date of filing, enter the effective date:

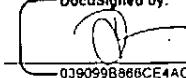
(The effective date: **Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.**)

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 this 28th day of December, 2024.

Required Signature for Florida Profit Corporation:

Signature of Director, Officer, or, if Directors or Officers have not been selected, an Incorporator:

 DocuSigned by:
039099B868CE4AC

Printed Name: Thomas R Hagstrom Title: President

Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies: [See below for required signature(s).]

Signature:  DocuSigned by:
039099B868CE4AC

Printed Name: Thomas R Hagstrom Jr Title: President

Signature: _____

Printed Name: _____ Title: _____

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

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.

Fees:

Articles of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

STATE
OF TENNESSEE, FL

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

ARTICLE I NAME Latitude Network Consulting, Inc.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:

Principal street address
11860 Aldendale Street
Orlando, FL 32836

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Consulting / Investing

ARTICLE IV SHARES 1,000
The number of shares of stock is: _____

ARTICLE V OFFICERS AND/OR DIRECTORS

Name and Title: Thomas R Hagstrom Jr, President
Address: 11860 Aldendale Street
Orlando, FL 32836

Name and Title: _____
Address: _____

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: Thomas R Hagstrom Jr
Address: 11860 Aldendale Street
Orlando, FL 32836

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

DocuSigned by:



Required Signature/Registered Agent

12/28/2024

Date

2024 JAN -3 PM 4:47
SHERIFF OF STATE
TALLAHASSEE, FL

FILED