# P24000006347

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PICK-UP WAIT MAIL				
(Business Entity Name)				
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### CORPORATE ACCESS,

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#### **WALK IN**

	PICK	UP: BROOK 1/24		
XX	CERTIFIED COPY PHOTOCOPY			
XX	GS FILING	CONVERSION		
•	CS AGOSTINI, USTCP, INC. (CORPORATE NAME AND DOCUMENT #)			
•	(CORPORATE NAME AND DOCUM	MENT #)		
	(CORPORATE NAME AND DOCUMENT)	MENT #)		
	(CORPORATE NAME AND DOCUM	MENT #)		
	(CORPORATE NAME AND DOCUM	MENT #)		
	(CORPORATE NAME AND DOCUM	MENT #)		
PECIAI ISTRU	L CTIONS:			
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## 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:
CS AGOSTINI, USTCP, INC.
Enter Name of the Converting Entity
2. The converting entity is a Corporation
(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 CA
(Enter state, or if a non-U.S. entity, the name of the country)
on 02/19/2019
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> : CS AGOSTINI, USTCP, 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 this 9th day of January	, <sub>20</sub> <b>24</b>	
Required Signature for Florida Profit Corpo		
Signature of Director, Officer, or, if Directors of	111	rator:
Printed Name: Cynthia S Agostini Title:	President	
Required Signature(s) on behalf of Converting companies: [See below for required signature(s)]	(s).	-
Signature: [14] A. M. S.	Cleading	
Signature: Lynthia S Agostini  Printed Name: Cynthia S Agostini	Title: President	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	<del></del>
Signature:		<del></del>
Printed Name:	Title:	<del></del>
Signature:		<u> </u>
Printed Name:	Title:	
If Florida General Partnership or Limited Li Signature of one General Partner.	iability Partnership:	
If Florida Limited Partnership or Limited Li Signatures of ALL General Partners.	ability Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Represent	tative.	7024 JAN
All others: Signature of an authorized person.		PIL ET
Fees:		* 1

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)

NAME The name of the corporation shall be: CS AGOSTINI, USTCP, INC. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Principal street address Mailing address, if different is: 11982 Pasco Trails Blvd. Spring Hill, FL 34610 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Tax Prepare/ ARTICLE IV SHARES The number of shares of stock is: 1,000 ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: Cynthia S Agostini, President/Director Name and Title: 11982 Pasco Trails Blvd. Address: Address: Spring Hill, FL 34610 Joseph A Agostini, Secretary/Director Name and Title: Name and Title:\_\_\_\_\_ 11982 Pasco Trails Blvd. Address: Address: Spring Hill, FL 34610 Name and Title: Name and Title: Address: Address:

ARTICL. The name	E VI REGISTERED AGENT and Florida street address (P.O. Box NOT acc	ceptable) of the registered agent is:
Name:	Registered Agents Inc	
Address:	7901 4th St N STE 300	
	St. Petersburg, FL 33702	
		**************************************
	Tough South	01/09/2024
	Required Signature/Registered Agent	Date