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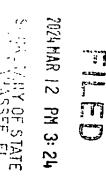
| (Requestor's Name) | | | | | |
|---|--|--|--|--|--|
| (Address) | | | | | |
| (Address) | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP WAIT MAIL | | | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies Certificates of Status | | | | | |
| Special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



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T. MATTHEWS

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| TO: New Filing Section Division of Corporations |
| SUBJECT: SANDRA JOHNSON COUNSELING SERVICES, INC. |
| Name of Resulting Florida Profit Corporation |
| The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the entity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S. |
| Please return all correspondence concerning this matter to: |
| SANDRA E. JOHNSON |
| Contact Person |
| Sandra Johnson Counseling Services, LLC |
| Firm/Company |
| 9225 Ulmerton Rd Ste 306 |
| Address |
| Largo, FL 33771 |
| City, State and Zip Code |
| sandij911@yahoo.com |
| E-mail address: (to be used for future annual report notification) |

For further information concerning this matter, please call:

Sandra E. Johnson at (914)443-5182

Area Code and Daytime Telephone Number

Name of Contact Person

following eligible

Enclosed is a check for the following amount:

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

Certificate of Status Status

Mailing Address:

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

New Filing Section Division of Corporations

Street Address:

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

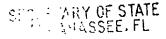
Tallahassee, FL 32303

Articles of Conversion
For
Converting Eligible Entity
Into

Florida Profit Corporation

FILED

2024 MAR 12 PM 3: 24



The Articles of Conversion <u>and attached Articles of Incorporation</u> 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:

SANDRA JOHNSON COUNSELING SERVICES, LLC

Enter Name of the Converting Entity

| 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 (Figure state, or if a pop. U.S. entity, the name of the country) |
| (Enter state, or if a non-U.S. entity, the name of the country) |
| on FEBRUARY 29, 2024 |
| 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:

SANDRA JOHNSON COUNSELING SERVICES, 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 | DATE OF FILING |
|---|----------------|
| (The effective date: Cannot be prior to nor more than 90 d | |
| Dangerment of State | , 2, |

<u>Note:</u> 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 | 3 | _day of _ | MARCH | 1 | | 20 | 4 | | | |
|--------------------|------------------|-----------|--|-----------------------------------|--------------------|--|--------------|-------------|----------|-----------|-----------|
| Requir | red Sig | nature fe | or Florid: | a Profit Corp | oration: | | | | | | |
| | V2 | du | E. | nson Title: | en_ | | | , an Incorp | orator: | | |
| | | , , | | lf of Converti fired signature | | l <u>a partnershi</u> | ips, limited | l partnersl | hips, an | d limited | liability |
| | | | | <u> </u> | | 1.46 | <u> </u> | | | | |
| Printed | l Name: | San | dra J | ohnsor |) | _ Title: MC | jΚ | | | | |
| Signati | ire: | | | | _ | | | | | | |
| Printed | l Name: | : | | | | _ Title: | | | | | |
| Signati | are: | | | | - | | . <u>.</u> . | | | | |
| Printed | l Name: | : | | | | _ Title: | | <u> </u> | | | |
| Signate | are: | | | | | | | | | | |
| Printed | l Name: | : | | | | _ Title: | | | | | |
| Signati | ure: | | | | | | | | | | |
| Printed | l Name: | | · - · · · · · · · · · · · · · · · · · · · | | | _ Title: | | | | | |
| Signati | ure: | | | | | | | | | | |
| Printed | l Name: | ; | | | | _ Title: | | | | | |
| | | | i <mark>rtnership</mark> ral Partnei | or Limited I | iability l | artnership: | | | | | |
| | | | rtnership neral Part | or Limited 1 ners. | <u>iability I.</u> | imited Parti | nership: | | | | |
| | | | ability Co | ompany: rized Represei | ntative. | | | | | | |
| All oth Signati | | n authori | ized perso | n. | | | | | | | |
| Fees: | Fees f Certif | | <i>r</i> : | of Incorporat | íon: | \$35.00 \$70.00 \$8.75 (Optio \$8.75 (Optio | | | | | |

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

| ARTICLE I NAME The name of the corporation shall be: | ON COUNSELING SERVICES, LYCTE |
|--|-----------------------------------|
| ARTICLE II PRINCIPAL OFFICE | SUM Y SHASSEE. FL |
| he principal place of business/mailing address is: | |
| Principal street address | Mailing address, if different is: |
| 9225 Ulmerton Rd Ste 306 | |
| _argo, FL 33771 | |
| ARTICLE III PURPOSE | |
| The purpose for which the corporation is organized is: To conduct all lawful busines | s under the guidelines for |
| consultants in the state of Flo | |
| consultants in the state of Fic | лиа |
| ARTICLE IV SHARES The number of shares of stock is: ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: Address: One Hundred One Hundre | Name and Title: Address: |
| Seminole, FL 33777 | |
| Name and Title: | Name and Title: |
| Address: | Address: |
| Name and Title: | Name and Title: |
| Address: | Address: |
| | |
| | |

ARTICLE VI REGISTERED AGENT

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

Name:

Sandra E. Johnson

Address:

9225 Ulmerton Rd Ste 306

Largo, FL 33771

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