

(Re	equestor's Name)	
(0.0	ldress)	
(//	uiess)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	· .
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



600425202336

03/12/24--01006--009 **105.00

2024 MAR 12 PM 2: 54

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: EINO HOLDINGS 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:
Sonia Becerra
Contact Person
Swyft Filings
Firm/Company
3 Greenway Plaza #1320
Address
Houston, TX 77046
City, State and Zip Code
info@legalcorpsolutions.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sonia Becerra877777-0450
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 and Certificate of and Certified Copy Status □\$122.50 Filing Fees, Certified Copy, and 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:
EINO HOLDINGS 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 (Finter state, or if a non-LLS entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country) on 06/23/2022
Enter date "Converting Entity" was first organized, formed or incorporated.
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.
2024 HAR

Signed this <u>26</u> day of <u>Feb</u>	. 20 24			
Required Signature for Florida Profit Corporation:				
Signature of Director, Officer, or, if Directors or Officer A SHLEY TIED GOFFitle: Directors Printed Name: A SHLEY TIED GOFFitle: Directors				
Required Signature(s) on behalf of Converting Florecompanies: [See below for required signature(s).]	ida partnerships, limited partnerships, a	nd limited liabili	ty	
Signature:				
Printed Name: BRIAN FIEBIGER	Title: MEMBED			
Signature:				
Printed Name:	Title:			
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 <u>ALL</u> General Partners.	Limited Partnership:			
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		2024 HAR		
All others: Signature of an authorized person.		AR 12		
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)	PM 2: 54		

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

ARTICLE			
The principa	al place of business/mailing address is:		
	Principal street address		Mailing address, if different is:
1601-	1 N MAIN ST #3159		
JACKS	SONVILLE, FL 32206		
	e for which the corporation is organized is: and all lawfull business.		024 HAR 12
			TO C
ARTICLE The number	IV SHARES of shares of stock is: 100,000		
ARTICLE	V OFFICERS AND/OR DIRECTORS	Name and Tit	_{le:} Ashley Fiebiger - Secretary
ARTICLE Name and T		Name and Tit	le: Ashley Fiebiger - Secretary 1601-1 N MAIN ST #3159
ARTICLE Name and T	v officers and/or directors Title: Tiber Jakab - President		
ARTICLE Name and T Address:	V OFFICERS AND/OR DIRECTORS Title: Tiber Jakab - President 1601-1 N MAIN ST #3159 JACKSONVILLE, FL 32206	Address:	1601-1 N MAIN ST #3159 JACKSONVILLE, FL 32206
ARTICLE Name and T Address: Name and T	V OFFICERS AND/OR DIRECTORS Title: Tiber Jakab - President 1601-1 N MAIN ST #3159	Address: Name and Tit	1601-1 N MAIN ST #3159
ARTICLE Name and T Address:	v officers AND/OR DIRECTORS Title: Tiber Jakab - President 1601-1 N MAIN ST #3159 JACKSONVILLE, FL 32206 Title: Ashley Fiebiger - Treasurer	Address:	JACKSONVILLE, FL 32206 Ashley Fiebiger - Director
ARTICLE Name and T Address: Name and T Address:	V OFFICERS AND/OR DIRECTORS Title: Tiber Jakab - President 1601-1 N MAIN ST #3159 JACKSONVILLE, FL 32206 Title: Ashley Fiebiger - Treasurer 1601-1 N MAIN ST #3159	Address: Name and Tit Address:	JACKSONVILLE, FL 32206 Jacksonville, FL 32206 Ashley Fiebiger - Director 1601-1 N MAIN ST #3159

ARTICL. The name	E VI REGISTERED AGENT and Florida street address (P.O. Box NOT	Tacceptable) of the registered agent is:
Name:	LEGALCORP SOLUTIONS, LLC	
Address:	3440 W HOLLYWOOD BLVD. SUITE 415	
	HOLLYWOOD, FL 33021	
*****	****	******
Having be this certifi	een named as registered agent to accept servicate, I am familiar with and accept the appo	vice of process for the above stated corporation at the place designated in ointment as registered agent and agree to act in this capacity
٠.		2/15/2024
٠.	Required Signature/Registered Agent	Date

THE TO STATE