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(Re	equestor's Name)	
(Ad	ldress)	
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(AO	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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(Bu	isiness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
<u> </u>		

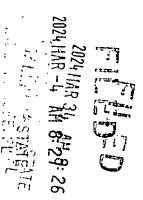




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COVER LETTER

TO:	Divisio	iling Section on of Corporations				
SUBJE	CT:	DELMARUA	HOSPITALITY Name of Resulting Flori	SOLUTIONS	COMPGAIG	, 1
DODGE	<u></u>		Name of Resulting Flori	da Profit Corporation		/
			. Articles of Incorporation ion" in accordance with ss			ng eligible
Please	return a	ll correspondence con-	cerning this matter to:			
		EL BUNDE Contact		_		
De	LMAR	UA HOSPITAL	ITY SOLUTIONS	Luc		
	81	7 GEORGIA	ST,			
	KE;	City, State as	L 33040 ad Zip Code			
F			future annual report notifi			
For fu	rther info	ormation concerning t	his matter, please call:			
	JOE	EL BUNDE	at (443Area	, 477-274	2	
	Na	ime of Contact Person	Area	Code and Daytime Telep	phone Number	
Enclos	sed is a c	check for the following	g amount:			
□ \$10)5.00 Fil	ling Fees S113.75 I and Certific Status	Filing Fees S113.75 Fi ate of and Certified		y, and	[-] 2024 HAR
	New I Divisi P.O. I	ng Address: Filing Section ion of Corporations Box 6327 hassee, FL 32314		Street Address: New Filing Section Division of Corpora The Centre of Tallah 2415 N. Monroe Str Tallahassee, FL 323	nassee cet, Suite 810	-4 MI 8: 27

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:

DELMARUA HOSPITALITY SOLUTIONS LLC
Enter Name of the Converting Entity
2. The converting entity is a
(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
on
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:
DELMARUA HOSPITALITY SOLUTIONS (COMPGNU)
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: FILING. (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.

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Signed thisday ofMARCH	. 20 24	
Required Signature for Florida Profit Corporation:		
Signature of Director, Officer, or, if Directors or Office	ers have not been selected, an Incorporator:	
Printed Name: Total Bunde Title: OW	NER	
Required Signature(s) on behalf of Converting Flor companies: [See below for required signature(s).]		d limited liability
Signature: POSU		
Printed Name: JOEL BUNDE	Title: 5WNER	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:		
Signature:		
Printed Name:		
Signature:		
Printed Name:		
Signature:		
Printed Name:	Title:	
If Florida General Partnership or Limited Liability Signature of one General Partner.	Partnership:	
If Florida Limited Partnership or Limited Liability	Limited Partnership:	
Signatures of <u>ALL</u> General Partners.		
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		
All others: Signature of an authorized person.		2024 IIAR -4
Fees: Articles of Conversion: Fees for Florida Articles of Incorporation:	\$35.00 \$70.00	IIAR-4 A

\$8.75 (Optional) \$8.75 (Optional)

Certified Copy: Certificate of Status:

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: DELMARUA	HACPETAL TITY SALLITUMS	A no Ocial
The name of the corporation shall be: 132277778	FIONITIFICATION OF THE PROPERTY OF THE PROPERT	_ (On panc)
ARTICLE II PRINCIPAL OFFICE		
The principal place of business/mailing address is:		
Principal street address	Mailing address, if different is:	
817 GEORGEA ST		
KEY WEST, FL 33040		
ARTICLE III PURPOSE		
The purpose for which the corporation is organized is:		
PROVIDING HOSPITALITY	CONSULTATION	
		
		
		
The number of shares of stock is: / OC		
		_
ARTICLE V OFFICERS AND/OR DIRECTORS		
Name and Title: JOEL BUNDE - MGR	Name and Title:	
Address: 817 GEORGIA ST	Address:	
KEY WEST FL 33040		202
		
Name and Title:	Name and Title:	
Address:	Address:	+ 1
	Address:	
	<u>حوناً</u>	
Name and Title:	Name and Title:	10
Address:	Address:	

ARTICL	E VI REGISTERED AGENT
The name	and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name:	JOEL BUNDE
Address:	817 GEDRGIA ST
	NEU WEST EL RENT

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

3/1/2024

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