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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| |
| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer. |
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Office Use Only



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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Aftermath Kustoms and Automotive 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:

| Dorothy Joh | nson | | | |
|---|---|-----------------------------------|---------------------------------------|--|
| | Contact Person | | | |
| Diversified Taxes | & Financial Serv | ices Inc | | |
| | Firm/Company | <u> </u> | | |
| 13154 Sprir | ng Hill Dr | | | |
| | Address | • | | |
| Spring Hill, | FL 34609 | | | |
| | City, State and Zip Code | e | | |
| | versifiedtaxe | | | |
| E-mail address: (t | o be used for future annu | ual report notificat | ion) | |
| For further information | concerning this matter, | please call: | | |
| Dorothy Joh | nnson | at (352 | ,683 | 3-5198 |
| | ontact Person | | ode and | Daytime Telephone Number |
| Enclosed is a check for | the following amount: | | | |
| ☐ \$105.00 Filing Fees | □\$113.75 Filing Fees and Certificate of Status | □\$113.75 Filing and Certified Co | g Fees ppy | ■\$122.50 Filing Fees, Certified Copy, and Certificate of Status |
| Mailing Addr New Filing Se Division of Co P.O. Box 632 Tallahassee, F | ection orporations 7 | | New F Division The Co 2415 N | Address: iling Section on of Corporations entre of Tallahassee J. Monroe Street, Suite 810 assee, 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: | | |
|---|--------------|-------|
| Aftermath Kustoms and Automotive, LLC | | |
| Enter Name of the Converting Entity | 200 | |
| 2. The converting entity is a Limited Liability Company | λH Ν | entro |
| (Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.) | 2024 MAY -7 | |
| first organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the name of the country) | E | |
| (Enter state, or if a non-U.S. entity, the name of the country) | - | O |
| on April 9 2024 | 4:27 | |
| 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> Aftermath Kustoms and Automotive Inc | | |
| Enter Name of Florida Profit Corporation | | |
| 4. This conversion was approved by the eligible converting entity in accordance with this chapter and the lacurrent/organic jurisdiction. | ws of | its |
| 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 b Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date listed as the document's effective date on the Department of State's records. | | |

| Signed this Od day of 1000 | | |
|--|--|-----------------------|
| Required Stanature for Florida Profit Cornoration: | | |
| Signature of Director, Officer, or, if Directors or Office | | ; |
| Printed Name: Almee P Hineman Title: Presi | dent | |
| Required Signature(s) on behalf of Converting Flori companies: [See below for required signature(s).] | | and limited liability |
| Signature: Cimes himeman | | _ |
| Printed Name: Aimee P Hineman | Title: MGR | _ |
| Signature: | | - (c) |
| Printed Name: | | EGRI HALL |
| Signature: | | |
| Printed Name: | Title: | SSEE M |
| Signature: | | TO THE TO |
| Printed Name: | Title: | 27 TE |
| Signature: | <u> </u> | _ |
| Printed Name: | Title: | - |
| Signature: | | - |
| Printed Name: | Title: | - |
| If Florida General Partnership or Limited Liability Signature of one General Partner. | | |
| If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners. | Limited Partnership: | |
| If Florida Limited Liability Company: Signature of a Member or Authorized Representative. | | |
| All others: Signature of an authorized person. | | |
| 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) | |

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

The name of the corporation shall be: Aftermath Kustoms and Automotive Inc ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Mailing address, if different is: Principal street address 14027 US Hwy 19 Hudson, FL 34667 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Any and All Lawful business ARTICLE IV SHARES The number of shares of stock is: 1000 ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: Brandon E Hineman S Name and Title: Aimee P Hineman PVT 14027 US Hwy 19 14027 US Hwy 19 Address: Address: Hudson, FL 34667 Hudson, FL 34667 Name and Title: Name and Title: Address: Address: Name and Title: Name and Title: ______ Address: Address:

ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Aimee P Hineman

Address: 14027 US Hwy 19

Hudson, FL 34667

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

2024 HAY -7 AM 4:27 SECRE MARY OF STATE