## P24000064803

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Ďo	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer.	

Office Use Only



900434689679

RECEIVED 2024 OCT 18 PM 3:57 31990138500531ATE CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 710029 4372594

AUTHORIZATION :

COST LIMIT : \$ -----

ORDER DATE: October 18, 2024

ORDER TIME : 3:03 PM

ORDER NO. : 710029-005

CUSTOMER NO: 4372594

## DOMESTIC AMENDMENT FILING

NAME: TALON ADVISORY INC.

EFFECTIVE DATE:

ARTICLES OF AMENDMENT

RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Shauna Godbolt -- EXT#

EXAMINER'S INITIALS: \_\_\_\_\_

## 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:
Talon Advisory Inc.
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
first organized, formed or incorporated under the laws of
first organized, formed or incorporated under the laws of
September 3, 2013
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>
Talon Advisory 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 Flori 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 thisday of	. 20	
Required Signature for Florida Profit Corporation:		
Signature of Director, Officer, or, if Directors or Office	ers have not been selected, an Incorporator:	
Printed Name: Leo G. DeYonker Title: Preside	ent	
Required Signature(s) on behalf of Converting Flor companies: [See below for required signature(s).]	ida partnerships, limited partnerships, an	d limited liability
Signature:		
Printed Name:	Title:	
Signature:		2024 0:07
Printed Name:	Title:	<u> </u>
Signature:		
Printed Name:	Title:	<u></u>
Signature:		5
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.		
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)

ADTICI E I	TO DDINCIDAL OFFICE			
ARTICLE I	PRINCIPAL OFFICE place of business/mailing address is:			
	Principal street address		Mailing address, if different is:	
12250 Tamia	ami Trl E, Suite 304			
Naples, FL 3	94113			
	III PURPOSE			)E/
	for which the corporation is organized is:		· •	₹
Any lawful a				2024 CCT   13
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ARTICLE	TV SHADES			
The number of ARTICLE	IV SHARES of shares of stock is:  V OFFICERS AND/OR DIRECTORS Leo G. DeYonker, President/Director	3		etan
The number of ARTICLE  Name and T	V OFFICERS AND/OR DIRECTORS  Leo G. DeYonker, President/Director	Name and Title	Leo G. DeYonker, Treasurer/Secre	etan
The number of ARTICLE	V OFFICERS AND/OR DIRECTOR:  Leo G. DeYonker, President/Director  12250 Tamlami Trl E, Suite 304	3	Leo G. DeYonker, Treasurer/Secre 12250 Tamiami Trl E, Suite 304	etan
The number of ARTICLE  Name and T	V OFFICERS AND/OR DIRECTORS  Leo G. DeYonker, President/Director	Name and Title	Leo G. DeYonker, Treasurer/Secre	etan
The number of ARTICLE  Name and T  Address:	V OFFICERS AND/OR DIRECTOR:  Leo G. DeYonker, President/Director  12250 Tamlami Trl E, Suite 304	Name and Title Address:	Leo G. DeYonker, Treasurer/Secre 12250 Tamiami Trl E, Suite 304	
The number of ARTICLE  Name and T  Address:	V OFFICERS AND/OR DIRECTOR:  Leo G. DeYonker, President/Director  12250 Tamlami Trl E, Suite 304  Naples, FL 34113	Name and Title Address: Name and Title	Leo G. DeYonker, Treasurer/Secre 12250 Tamiami Trl E, Suite 304 Naples, FL 34113	
The number of ARTICLE  Name and T  Address:  Name and T	V OFFICERS AND/OR DIRECTORS  Leo G. DeYonker, President/Director  12250 Tamlami Trl E, Suite 304  Naples, FL 34113  ittle:	Name and Title Address: Name and Title	Leo G. DeYonker, Treasurer/Secre  12250 Tamiami Trl E, Suite 304  Naples, FL 34113	
ARTICLE  Name and T  Address:  Name and T  Address:	V OFFICERS AND/OR DIRECTORS  Leo G. DeYonker, President/Director  12250 Tamlami Trl E, Suite 304  Naples, FL 34113  ittle:	Name and Title Address:  Name and Title Address:	Leo G. DeYonker, Treasurer/Secre  12250 Tamiami Trl E, Suite 304  Naples, FL 34113	
ARTICLE  Name and T  Address:  Name and T  Address:	V OFFICERS AND/OR DIRECTORS  Leo G. DeYonker, President/Director  12250 Tamlami Trl E, Suite 304  Naples, FL 34113  itle:	Name and Title Address: Name and Title Address: Name and Title	Leo G. DeYonker, Treasurer/Secre  12250 Tamiami Trl E, Suite 304  Naples, FL 34113	
The number of ARTICLE  Name and T  Address:  Name and T  Address:	V OFFICERS AND/OR DIRECTOR:  Leo G. DeYonker, President/Director  12250 Tamlami Trl E, Suite 304  Naples, FL 34113  ittle:	Name and Title Address: Name and Title Address: Name and Title	Leo G. DeYonker, Treasurer/Secretics:  12250 Tamiami Trl E, Suite 304  Naples, FL 34113  e:	
The number of ARTICLE  Name and T  Address:  Name and T  Address:	V OFFICERS AND/OR DIRECTOR:  Leo G. DeYonker, President/Director  12250 Tamlami Trl E, Suite 304  Naples, FL 34113  ittle:	Name and Title Address: Name and Title Address: Name and Title	Leo G. DeYonker, Treasurer/Secretics:  12250 Tamiami Trl E, Suite 304  Naples, FL 34113  e:	

ARTICL. The name	E VI REGISTERED AGENT and Florida street address (P.O. Box NOT accepts	able) of the registered agent is:		
Name:	Leo G. DeYonker			
Address:	12250 Tamlami Trl E, Suite 304			
	Naples, FL 34113			
Having be	een named as registered agent to accept service of picate, I am familiar with and accept the appointmen	rocess for the above stated corporation at as registered agent and agree to act in t	at the place design his capacity	ated in
	Required Signature/Registered Agent	Date	• –1	: