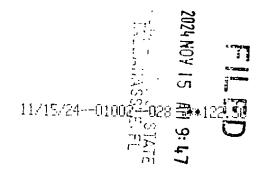
# P2400000011

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

Office Use Only



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### **COVER LETTER**

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

TO: New Filing Section

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:
Gifts of Love Creations & Events, 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 (Enter state, or if a non-U.S. entity, the name of the country)
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>
GIFTS OF Love Creations & Events, 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 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.

Signed this 16 day of Nover	nber, 20 au			
Required Signature for Florida Profit Corporate	ion:			
Signature of Director, Officer, or, if Directors or Officer, or, if Direct	·	:		
Required Signature(s) on behalf of Converting		nd limited l	iability	Ľ
Signature: See below for required signature(s).]  Printed Name: Auc Mathy		_		
Printed Name: Paula Math.	S_Title: 1)', rector			
Signature:		- <del>Z</del>	2024 HOV 15	
Printed Name:	Title:		/ AOA	الم
Signature:		(n - (n -	5	
Printed Name:	Title:		11 9: 1.	
Signature:		HIF HIF	1.7	
Printed Name:	Title:	-		
Signature:		<u>-</u>		
Printed Name:	Title:	-		
Signature:		-		
Printed Name:	Title:	-		
If Florida General Partnership or Limited Liab Signature of one General Partner.	ility Partnership:			
If Florida Limited Partnership or Limited Liab Signatures of ALL General Partners.	ility Limited Partnership:			
If Florida Limited Liability Company: Signature of a Member or Authorized Representati	ve.			
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:	re creations A Events,
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:	
Principal street address 7025 W. WCRVS AVE 1113	Mailing address, if different is:
Tampa FL. 33634	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	
Creations and events	Through Product,
creations and events	Through Product,
	The second second
	16 4
ARTICLE IV SHARES The number of shares of stock is:	
Name and Title: V Charles W (1) 1 10 1 (1) Name and Title: W (1) 1 (1) 10 1 (1) Name and (1)	Т
Name and	Title:
Address: 7028 W. Waters All Address:	
#113 Tampa, F1 33634	
Name and Title: Caroline TTV Horse Name and Secretary 1028 Clear With repuddress:	Title:
Haytona, Beach, F132114	
Name and Title: Wishop DR. D. A. Horane and	Title:
Address: Address:	
Daytona Buch, Fr.	
paytona Duch, Fr.	
Jan 17	

ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> (P.O. Box NOT acceptabl	e) of the registered agent is:
Name: Jaula Mathis	
Address: 7028 W. Wakes Ave	, <del>1</del> 113
Tampa El- 33634	
Having been named as registered agent to accept service of proceed this certificate, I am familiar with and accept the appointment as	
Jula Mathi	11-16-24
Required Signature/Registered Agent	Date '
	<b>2024</b>
	7024 NOV 15
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