P24000070928

(Requestor's Name)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
(Cooking Market)					
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Special Instructions to Filing Officer:					
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SECRETARY OF STATE TALL AHASSEE, FLORIDA

1 1



May 3, 2024

KIANOR SHAHMOHAMMADI 200 ROSA L JONES DR COCOA, FL 32922 US

SUBJECT: GLOBAL SUMMITS INSTITUTE, LLC

Ref. Number: W24000069206

2024 AUG 12 PM 3: 25

4

We have received your document for and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

If you have any further questions concerning your document, please call (850) 245-6052.

KAIN COSTELLO Regulatory Specialist II New Filling Section

Letter Number: 424A00009700

COVER LETTER

TO: New Filing Sec Division of Cor							
	al Summits Ins	stitu	ute, LL	С			
30BJEC1			ting Florida		Corporation		
	f Conversion, Articles of offt Corporation" in acco				are submitted to convert the following eligible 33 & 607.0202, F.S.		
Please return all corresp	ondence concerning this	matt	er to:				
Kianor Shahi	mohammadi						
	Contact Person						
Global Sumn	nits Institute, I	LLC					
	Firm/Company						
200 Rosa L	Jones Drive						
, .	Address		-				
Cocoa, FL. U	JS 32922						
	City, State and Zip Code	?					
kianor.shah@	gmail.com						
E-mail address: (to	o be used for future annu	al rep	ort notifica	tion)			
For further information	concerning this matter, j	oleasc	call:				
Kianor Shahmohamn	nadi	_at (_	618)917	5805		
Name of Co	ontact Person	_	Area Co	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 Filin Certified Co	_	■\$122.50 Filing Fees. Certified Copy, and Certificate of Status		
Mailing Addr					Address:		
New Filing Section Division of Corporations				New Filing Section Division of Corporations			
P.O. Box 6327				The Centre of Tallahassee			

Tallahassee, FL 32314

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

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:
Global Summits Institute, 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 Nevada (Enter state, or if a non-ILS, entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
on 9/20/2017
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: Global Summits Institute, 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.
2024 APR 2 SECRETA FALLAHAS

Signed this 10th day of July	20_24	
Required Signature for Florida Profit Corpor	ation:	
Signature of Director, Officer, or, if Directors or Wionor Shah	Officers have not been selected, an Incorpora	itor:
Printed Name: Kianor Shahmohammadi Title:	Manager	
Required Signature(s) on behalf of Converting	Florida partnerships, limited partnership	s, and limited liability
companies: [See below for required signature(s		
Printed Name: Kayvon Javid	_{Title:} Manager	
Signature:		
Printed Name:		
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
If Florida General Partnership or Limited Liz Signature of one General Partner.	ability Partnership:	
If Florida Limited Partnership or Limited Lis Signatures of <u>ALL</u> General Partners.	bility Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representation	ntive.	
All others: Signature of an authorized person.		
Fees: Articles of Conversion:	\$35.00	

\$70.00

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

Fees for Florida Articles of Incorporation:

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

ARTICLE I The name of t	NAME he corporation shall be: Global Sum	mits Instit	ute, Inc.
ARTICLE II			
i ne principai	place of business/mailing address is:		
200 Rosa L Jone	Principal street address es Drive, Cocoa, FL. US 32922		Mailing address, if different is:
	II PURPOSE for which the corporation is organized is: pose of the corporation is to	ongage in	lawful activity for which
· · · · · · · · · · · · · · · · · · ·	<u> </u>		
corpora	ations may be incorporate	ed in this	state.
			
		·	
	V SHARES of stock is:		
ARTICLE			
Name and Ti	tle: Kianor Shahmohammadi	Name and Title	Kayvon Javid
Address:	200 Rosa L Jones Drive	Address:	200 Rosa L Jones Drive
	Cocoa, FL. US 32922		Cocoa, FL. US 32922
Name and Ti	tle:	Name and Title	e:
Address:		Address:	
, radiess.			
Name and Ti	tle:	Name and Titl	e:
			v
Address:		Address:	

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

Name:

Address:

Cocoa, FL. US 32922

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

7/10/2024 Date

Proved Part Style

MADE OF AMIO. OF