

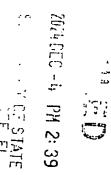
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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COVER LETTER

TO:

TO:	New Filing Sec Division of Cor					
SERI	ECT. TITAN AS	SSEMBLY INC.				
			Resulting Flor	ida Profit	Corporation	
The entity	nclosed Articles o into a "Florida Pr	of Conversion. Articles of tofit Corporation" in according to the corporation of the corp	I Incorporation ordance with s	1. and fees s. 607.119	are submitted to convert the following eligibles & 607.0202, F.S.	gible
Please	return all corresp	ondence concerning this	s matter to:			
Anth	ony Morales					
		Contact Person	· · · · · ·	<u>-</u>		
MyU:	SACorporation	.com				
		Firm/Company				
1 Ra	disson Plaza, S	Suite 800				
		Address				
New	Rochelle, NY	10801				
		City, State and Zip Code	`			
info@	myusacorpora	ation.com				
	E-mail address: (t	o be used for future annu	ial report notif	īcation)		
For fu	irther information	concerning this matter,	please call:			
	ony Morales		at (877	, 330	-2677	
	Name of Co	ontact Person		Code and	Daytime Telephone Number	
Enclo	sed is a check for	the following amount:				
□ \$10	05.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	■\$113.75 F and Certified	_	□\$122.50 Filing Fees. Certified Copy. and Certificate of Status	
	Mailing Addr New Filing Sc Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7		New F Division The Co	Address: Filing Section on of Corporations entre of Tallahassee 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:
TITAN ASSEMBLY 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 FL
first organized, formed or incorporated under the laws of FL (Enter state, or if a non-U.S. entity, the name of the country)
on 04/28/2021
Enter date "Converting Entity" was first organized, formed or incorporated. 70 70 70 70 70 70 70 70 70 70 70 70 70
3. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation
TITAN ASSEMBLY 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 Floric 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 22nd day of November	, 20 24			
Required Signature for Florida Profit Corporation:				
Signature of Director Officer, or, if Directors or Office				
Printed Name: James Ice Title: Chief E	xecutive Officer			
Required Signature(s) on behalf of Converting Flor companies: [See below for required signature(s).]	<u>ida partnerships, limited partnerships, a</u>	nd limi	ted ljal	<u>bility</u>
Signature:				
		-		
Printed Name: James Ice	Title: Chief Executive Officer	-		
Signature:		-		
Printed Name:	Title:	- 5/	707	
Signature:			72	• •
Printed Name:	Title:		() 	स्य- क्या
Signature:		⊸.	PH	, 6 3 2 6 3
Printed Name:	Title:	EST.	PM 2: 39	
Signature:			33	
Printed Name:				
Signature:		_		
Printed Name:		_		
If Florida General Partnership or Limited Liability Signature of one General Partner.	Partnership:			
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)

ARTICLE	II PRINCIPAL OFFICE al place of business/mailing address is:		
тие рипегра	a place of business/maiting address is:		
	Principal street address	Mailing address, if different is:	
304 Columb	us Ave		
Lehigh Acres	s, FL 33936		
ARTICLE The purpose	III PURPOSE c for which the corporation is organized is:		
		air work for sanitation trucks and suites	
		work for carmation adoles and sales	<u> </u>
			974 00
			\Box
			<u>-</u>
		rn-H	7
		$\int_{\mathbb{T}_1} C t$	Α.
		TATE TO THE	2:39
The number	IV SHARES of shares of stock is: 3 V OFFICERS AND/OR DIRECTO James Ice, Chief Executive Officer		12:39
The number	of shares of stock is: 3 V OFFICERS AND/OR DIRECTO		2:39
The number ARTICLE Name and T	of shares of stock is: 3 V OFFICERS AND/OR DIRECTO James Ice, Chief Executive Officer	RS	12:
The number ARTICLE Name and T	v OFFICERS AND/OR DIRECTO. James Ice, Chief Executive Officer Title: and Director	RS Name and Title:	1:: G
The number ARTICLE Name and T Address:	V OFFICERS AND/OR DIRECTO James Ice, Chief Executive Officer Title: and Director 304 Columbus Ave	RS Name and Title: Address:	
The number ARTICLE Name and T Address: Name and T	V OFFICERS AND/OR DIRECTO James Ice, Chief Executive Officer Title: and Director 304 Columbus Ave Lehigh Acres. FL 33936 Kori Ice, Chief Financial Officer Title: and Director	Name and Title: Address: Address:	
The number ARTICLE Name and T Address: Name and T	V OFFICERS AND/OR DIRECTO James Ice, Chief Executive Officer Title: and Director 304 Columbus Ave Lehigh Acres. FL 33936 Kori Ice, Chief Financial Officer Title: and Director 304 Columbus Ave	Name and Title: Address: Name and Title: Address:	
The number ARTICLE Name and T Address: Name and T Address:	V OFFICERS AND/OR DIRECTO James Ice, Chief Executive Officer Title: and Director 304 Columbus Ave Lehigh Acres. FL 33936 Kori Ice, Chief Financial Officer Title: and Director 304 Columbus Ave	Name and Title: Address: Name and Title: Address:	
The number ARTICLE Name and T Address: Name and T Address:	V OFFICERS AND/OR DIRECTO James Ice, Chief Executive Officer Title: and Director 304 Columbus Ave Lehigh Acres. FL 33936 Kori Ice, Chief Financial Officer Title: and Director 304 Columbus Ave Lehigh Acres, FL 33936	Name and Title: Address: Name and Title: Name and Title: Name and Title:	

The <u>name</u>	and Florida street address (P.O. Box NOT acceptal	le) of the registered agent is:	
Name:	Kori Ice		
Address:	304 Columbus Ave		
	Lehigh Acres, FL 33936		
**************************************	***********	*********	
this certifi	cate, I am familiar with and accept the appointment	ocess for the above stated corporation at the place designal is registered agent and agree to act in this capacity	ed in
	Har L	. ,	
	our-	11/22/2024	
	Required Signature/Registered Agent	Date	

ARTICLE VI REGISTERED AGENT

2024 DEC -4 PM 2:39