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| (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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Office Use Only



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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

| DATE 12/16/2024 | _ | | ** | WALK | - INI## |
|---------------------|---|----------------------|-------------|------------|-------------|
| C 1-h | anna Canadhina Ina | | | WALA | 114 |
| ENTITY NAME S JON | nson Consulting, Inc. | | | | |
| | | | | 2024 055 | |
| DOCUMENT NUMBER | | | | | |
| | **PLEASE FILE THE ATTACHED | AND RETURN** | | 14:6 1/1 9 | |
| XXXXXXXX | Plain Copy | | rei | 7 | |
| | Certified Copy | | | | |
| | Certificate of Status | | | | |
| | Certified Copy of Arts & Amendments Certificate of Good Standing | | | | |
| | **APOSTILLE' / NOTARIAL CL | RTIFICATION** | | | |
| COUNTRY OF DESTIN | ATION | | | | |
| NUMBER OF CERTIFIC | PATES REQUESTED | | | | |
| TOTAL OWED \$105. | 00 A | CCOUNT #: I201600000 | 72 | | |
| | | 5.87M | | | |
| Please call Tina at | the above number for any issues of | concerns. Thank you | so muc | ch! | |

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: | | |
|--|-----------------------------|-------|
| Johnson Consulting, Inc. | | |
| Enter Name of the Converting Entity | 2 | |
| 2. The converting entity is a Corporation | 2024 C E C | _ |
| (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 Maryland | • | 11 |
| (Enter state, or if a non-U.S. entity, the name of the country) | 22.77 1.1 1:6 8.2 | |
| on 02/28/2014 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> | | |
| S Johnson Consulting, Inc. | | |
| Enter Name of Florida Profit Corporation | | |
| 4. This conversion was approved by the eligible converting entity in accordance with this chapter and current/organic jurisdiction. | the laws of it | ts |
| 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 file Department of State.) | ed by the Fl | orida |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this listed as the document's effective date on the Department of State's records. | date will not | : be |

| Signed | this 13th | _day of _ | December | , | 20_24 | | | |
|-------------------|--|--|--------------------------------|--|---------------------------------------|---------------|----------|--------------|
| | | | Profit Corporation | | | | | |
| Signati | ure of Director, | Officer, or | , if Directors or Offic | cers have not been sele | ected, an Incorpor | rator: | | |
| /s/ Cai | tlin Lazarus | | | | | | | |
| Printed | l Name: <u>Caitlin</u> | Lazarus | Title: _Attor | ney-in-Fact | | | | |
| Requir | red Signature(s |) on beha | If of Converting Flo | orida partnerships, li | mited partnershi | ips, and timi | ted liab | <u>ility</u> |
| com pa | nies: [See belo | w for requ | ired signature(s).] | | | | | |
| Signati | ure: /s/ Caitl | in Lazarus | | | | | 20 | |
| Printed | l Name: <u>Caitlin</u> | Lazarus | | Title: Attorney- | -in-Fact | <u> </u> | 2024 pro | |
| | | | | | | | ص ح | 7 |
| Printed | 1 Name: | <u>. </u> | . <u> </u> | Title: | . | | | |
| Signati | ure: | | | | | | 1:6 :: | |
| | | | | Title: | | | 7 | |
| Signati | ure: | | | | | | | |
| Printed | l Name: | | | Title: | <u> </u> | | | |
| Signati | ure: | | | | | _ | | |
| Printed | I Name: | | | Title: | · · · · · · · · · · · · · · · · · · · | | | |
| Signati | ure: | | | | | | | |
| Printec | 1 Name: | | | Title: | <u>.</u> | | | |
| If Flor Signat | rida General Pa ure of one Gene | artnership ral Partner | or Limited Liabilit | ty Partnership: | | | | |
| | rida Limited Pa ures of <u>ALL</u> Ge | | | ty Limited Partnersh | ip: | | | |
| | rida Limited Li ure of a Membe | | mpany: rized Representative | :. | | | | |
| All oth Signat | ners: ure of an author | ized perso | n. | | | | | |
| Fees: | Articles of Co Fees for Florid Certified Cop Certificate of | da Articles y: | of Incorporation: | \$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 I NAME The name of the corporation shall be: S Johnson Consul | ting, Inc. | | | _ |
|---|--|--|---------------------------------------|----------|
| • | <u> </u> | | | _ |
| he principal place of business/mailing address is: | | | | |
| ne principal place of trushess maining address is. | | | | |
| Principal street address | 401 | Mailing address, if dif E Las Olas Blvd #130-78 | fferent is: 31 | |
| 01 E Las Olas Blyd #130-781 | | | <u> </u> | 20: |
| Fort Lauderdale, FL 33301 | Fort | Lauderdale, FL 33301 | | 2024 |
| | | | | (2) |
| | | | · · · | <u>ص</u> |
| ARTICLE III PURPOSE | | | | .‡ |
| he purpose for which the corporation is organized is: | | | | ڊ |
| All Lawful Purposes | | | | <u>,</u> |
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| <u> </u> | | | | |
| <u> </u> | | | | |
| ARTICLE IV SHARES he number of shares of stock is: 100 ARTICLE V OFFICERS AND/OR DIRECTORS | | | | |
| he number of shares of stock is: 100 ARTICLE V OFFICERS AND/OR DIRECTORS | ! | | | |
| he number of shares of stock is: 100 ARTICLE V OFFICERS AND/OR DIRECTORS Same and Title: Stephen Johnson - Director | Name and T | l'itle: Shilpa Johnson - Dir | rector | |
| he number of shares of stock is: 100 ARTICLE V OFFICERS AND/OR DIRECTORS Same and Title: Stephen Johnson - Director | ! | | rector | |
| he number of shares of stock is: 100 ARTICLE V OFFICERS AND/OR DIRECTORS Same and Title: Stephen Johnson - Director | Name and T | l'itle: Shilpa Johnson - Dir | rector #130-781 | |
| he number of shares of stock is: 100 ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: Stephen Johnson - Director Address: 401 E Las Olas Blvd #130-781 Fort Lauderdale, FL 33301 | Name and T Address: | l'itle: Shilpa Johnson - Dir 401 E Las Olas Blvd # Fort Lauderdale, FL 3 | rector #130-781 33301 | |
| he number of shares of stock is: 100 ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: Stephen Johnson - Director Address: 401 E Las Olas Blvd #130-781 | Name and T Address: | l'itle: Shilpa Johnson - Dir 401 E Las Olas Blvd # | rector #130-781 33301 | |
| he number of shares of stock is: 100 ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: Stephen Johnson - Director Address: 401 E Las Olas Blvd #130-781 Fort Lauderdale, FL 33301 | Name and T Address: Name and T | l'itle: Shilpa Johnson - Dir 401 E Las Olas Blvd # Fort Lauderdale, FL 3 | rector #130-781 33301 | |
| he number of shares of stock is: 100 ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: Stephen Johnson - Director Address: 401 E Las Olas Blvd #130-781 Fort Lauderdale, FL 33301 | Name and T Address: Name and T Address: | l'itle: Shilpa Johnson - Dir 401 E Las Olas Blvd # Fort Lauderdale, FL 3 | rector #130-781 33301 | |
| he number of shares of stock is: 100 ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: Stephen Johnson - Director Address: 401 E Las Olas Blvd #130-781 Fort Lauderdale, FL 33301 | Name and T Address: Name and T Address: | l'itle: Shilpa Johnson - Dir 401 E Las Olas Blvd # Fort Lauderdale, FL 3 | rector #130-781 33301 | |
| he number of shares of stock is: 100 ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: Stephen Johnson - Director Address: 401 E Las Olas Blvd #130-781 Fort Lauderdale, FL 33301 Name and Title: | Name and T Address: Name and T Address: | l'itle: Shilpa Johnson - Dir 401 E Las Olas Blvd # Fort Lauderdale, FL 3 | rector #130-781 83301 | |
| he number of shares of stock is: 100 ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: Stephen Johnson - Director Address: 401 E Las Olas Blvd #130-781 Fort Lauderdale, FL 33301 Name and Title: Address: | Name and T Address: Name and T Address: Name and T | l'itle: Shilpa Johnson - Dir 401 E Las Olas Blvd # Fort Lauderdale, FL 3 l'itle: | rector #130-781 33301 | |
| he number of shares of stock is: 100 ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: Stephen Johnson - Director Address: 401 E Las Olas Blvd #130-781 Fort Lauderdale, FL 33301 Name and Title: | Name and T Address: Name and T Address: Name and T | l'itle: Shilpa Johnson - Dir 401 E Las Olas Blvd # Fort Lauderdale, FL 3 | rector #130-781 33301 | |

| ARTICLE The name | | TERED AGENT cet address (P.O. Box NOT acceptat | ole) of the registered age | ent is: | | |
|---------------------------|--------------------------------------|---|--|--|-------------------------|--------------|
| Name: | | ations Network Inc. | | | | |
| Address: | 801 US Highw | ay 1 | | | | |
| | North Palm Be | ach, Florida 33408 | | | | |
| | | | | | | |
| ***** | ******* | ; ****************************** | **** | **** | 20: | |
| Having be this certifi | en named as rez cate. I am famili | istered agent to accept service of pro ar with and accept the appointment of | ocess for the above state is registered agent and | ed corporation at the agree to act in this | re place de capacity | esignated in |
| /s/ Caitlin L | azarus | Caitlin Lazarus, Special Secreta | ry 12/13/20 |)24 | ي د . | |
| | Required Sign | ature/Registered Agent | <u> </u> | Date | ; | |
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