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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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025 JAN 29 PM 2:

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

| Triple J Industries (| Of America Inc | <u> </u> | |
|-----------------------|-------------------|--|--|
| Please Debit FCA00 | 00000003 For: 105 | | |
| Thank you Seth Nee | elev Si | 3 | |
| Staff | | Art of Inc. File | |
| | | Trade/Service Mark | |
| | | Merger File | |
| | | Art, of Amend. File | |
| | | RA Resignation | |
| | | Dissolution / Withdrawal | |
| | | Annual Report / Reinstatement | |
| | | Cert. Copy | |
| | | Photo Copy Certificate of Good Standing | |
| | | Certificate of Status | |
| | | Certificate of Fictitious Name | |
| | | Corp Record Scarch | |
| , | | Officer Search | |
| 1 | 2/ | Fictitious Search | |
| Signature | | Fictitious Owner Search | |
| Signature // | | Vehicle Search | |
| | _ | Driving Record | |
| Requested by: | | UCC 1 or 3 File | |
| Name | Date Time | UCC 11 Search | |
| rune | | UCC 11 Retrieval | |
| Walk-In | Will Pick Up | Courier | |

COVER LETTER

| TO: New Filing Section Division of Corporations | 3 | | | | |
|--|---|---|---|------------------|--------|
| SUBJECT: Triple | U Industr Name of Resulting Flo | <u>1es Of</u> orida Profit Corporati | Meno | ca Ir | IC. |
| The enclosed Articles of Conver- entity into a "Florida Profit Corp | • | | | ne following eli | igible |
| Please return all correspondence | concerning this matter to: | | | | |
| Maurice Ro | bin Son eact Person | | | | .] |
| Firm of Rob | inson Craic | 1 Roge | ers. | | |
| 941 S. Orang | ge Blosser | n Trail | | % L.7 | |
| Apopka FL City, Sta | 32703 te and Zip Code | | | | |
| mrobinscoa E-mail address: (to be used | Q VAhoo, CC for fugure annual report not | itication) | | | |
| For further information concerni | ng this matter, please call: | | | | |
| Maurice Robin | 50n a (40) | 814-3 | 504 | | |
| Name of Contact Per Enclosed is a check for the follow | | a Code and Daytime | retepnone Nume | oer Oer | |
| ☐ \$105.00 Filing Fees ☐ \$113. and Cert Status | 75 Filing Fees □\$113.75 (ificate of and Certifie | d Copy Certified | 50 Filing Fees, I Copy, and ite of Status | | |
| Mailing Address: | | Street Address | | | |
| New Filing Section | n.c | New Filing Sec | | | |

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

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

~ 3

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:

| Triple J Industries LLC Enter Name of the Converting Entity | · 3 | |
|--|------------------|---------|
| Enter Name of the Converting Entity | ´ . . | |
| 2. The converting entity is a limited liability company. (Enter entity type. Example: limited liability company, limited partnership, common law or business trust, etc.) | ; | ; ; |
| first organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country) | ; ; ; | |
| on March 15, 2024 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> Triple J Industries Of America T 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. | | |
| 5. If not effective on the date of filing, enter the effective dates an wary 1, 202. | > | |
| 5. If not effective on the date of filing, enter the effective date: <u>January 1</u> 202. (The effective date: Cannot be prior to nor more than 90 days after the date this document is f | iled by the | Florida |
| Department of State.) | | |
| 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. | s date will i | not be |
| usion as the document's effective date on the Department of State's records. | | |

| Signed this 6th day of Janua | ry .20 25 | |
|---|--|---------------------|
| Required Signature for Florida Profit Corpora | | |
| Signature of Director, Officer, or, if Directors or Column | | |
| Printed Name: Carlos Colemane: | President | |
| Required Signature(s) on behalf of Converting companies: [See below for required signature(s) | Florida partnerships, limited partnerships, an | d limited liability |
| Signature: Curlos Coleman | | |
| Printed Name Carlos Coleman | Title: President |) } |
| Signature: | | ; · |
| Printed Name: | Title: | 7 |
| Signature: | | |
| Printed Name: | Title: | |
| Signature: | | |
| Printed Name: | Title: | |
| Signature: | | |
| Printed Name: | Title: | |
| Signature: | | |
| Printed Name: | Title: | |
| If Florida General Partnership or Limited Lia Signature of one General Partner. | bility Partnership: | |
| If Florida Limited Partnership or Limited Lia Signatures of <u>ALL</u> General Partners. | bility Limited Partnership: | |
| If Florida Limited Liability Company: Signature of a Member or Authorized Representa | tive. | |
| All others: Signature of an authorized person. | | |
| Fees: Articles of Conversion: Fees for Florida Articles of Incorporation | \$35.00 : \$70.00 | |

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

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)

| The name of the corporation shall be TVIDE | I Industries Of America Inc |
|--|---|
| • | 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 |
| ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: | |
| | Malling a Idania IV AUChana in |
| 2327 Rognoke Springs Dr | 185 Mary Cooper Way |
| 2327 Rognoke Springs Dr Ryskin FL 33570 | 185 Mailine address, Hdifferent is: Oak Harbor WA 99277 |
| | |
| | |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: | · ; · ; · ; |
| any and all lawful ! | husines |
| St. 19 St. 101 Ct 1 1 (W) IUI | DAJI ESS |
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| ARTICLE IV SHARES The number of shares of stock is: | |
| ARTICLE V OFFICERS AND/OR DIRECTORS | |
| | |
| Name and Title Carlos Coleman, President | Name and Title: |
| Address: 1851 SW Cooper Way | Address: |
| Oak Harbor, WA 99277 | |
| Name and Title: | Name and Title: |
| Address: | A. I. Januara |
| | Address. |
| | |
| Name and Title: | Name and Title: |
| Address: | Address: |
| | |
| | · · · · · · · · · · · · · · · · · · |

| ARTICLE VI REGISTERED AGENT | |
|---|---------------|
| The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: | |
| Name: Mallrice Robinson | |
| Andress: 94 S Orange Blossom Tr Anarka FL 32703 | |
| Apopka FL 32703 | |
| | |
| | |
| ************************************** | , |
| Having been named as registered agent to accept service of process for the above stated corporation at the place | designated jo |
| this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity | |
| 1 / 100 | 3 |
| 1/6/25 | |
| Required Signature/Registered Agent Date | ノ |