## P25000038946 71105

(Requestor's Name)
(Address)
(Address)
(1.001000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

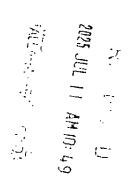
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## **COVER LETTER**

TO: New Filing Section Division of Corp					
SUBJECT: CAJORO	GROUP CONS				
SUBJECT:		Resulting Florida	Profit (	Corporation	
The enclosed Articles of entity into a "Florida Pro				are submitted to convert the following elig 33 & 607.0202, F.S.	ible
Please return all correspo	ondence concerning this	matter to:			
Joel Johnson					
	Contact Person				
CAJORO GROUP					
	Firm/Company				
1108 Thomasville Re	oad				
	Address				
Tallahassee, FL 323	03				
(	City, State and Zip Code	;			
SonicWarriorMusic@	gmail.com				
E-mail address: (to	be used for future annu	al report notificat	ion)		
For further information of	concerning this matter, p	olease call:			
Joel Johnson		at ( 850	241.2	2749	
Name of Cor	ntact Person		de and	Daytime Telephone Number	
Enclosed is a check for the	he following amount:				
	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filing and Certified Co		■\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Addre New Filing Sec Division of Co P.O. Box 6327 Tallahassee, FI	ction rporations	]	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:
CAJORO GROUP, LL C
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 FLORIDA
(Enter state, or if a non-U.S. entity, the name of the country)
12/03/2021
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>
CAJORO GROUP Coro
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.)
<u>Note:</u> 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 thisday of	, 20 <mark>_25</mark>
Required Signature for Florida Profit Corporation	<u>n:</u>
Signature of Director, Officer, or, if Directors or Office	
Printed Name: Joel Johnson Title: Mana	
Required Signature(s) on behalf of Converting Flo	orida partnerships, limited partnerships, and limited liability
companies: [See below for required signature(s).]	
Signature: Rober Brown	Managor
Printed Name: Rober Brown	Title: Manager
Signature:	<del> </del>
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	<del></del>
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	y 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 I	II PRINCIPAL OFFICE			
	place of business/mailing address is:			
	Principal street address		Mailing address, if different is:	
1108 Thor	masville Road	32	205 Triton Circle	
Tallahasse	allahassee, FL 32303 Tallahassee, FL 32312		allahassee, FL 32312	
	III PURPOSE  for which the corporation is organized is: se of this corporation is to establish and	build for-profit	t national and international	
business re	elationships in accordance with all appli	cable U.S. stat	te and federal laws in order	
to generate	e and maximize financial profits. The ma	arketable servi	ces employed to accomplish	
this goal ir	poludo, but is not limited to concultin	a and advast		
	nciude, but is not inflited to consultin	iq and educat	tional/training services.	
<b>J</b> - · · ·		g and educat	cional/training services.	
<b>J</b>	ncidde, but is not iiniited to consultin	g and educat	ional/training services.	
	iciade, but is not innited to consultin	g and educat	ional/training services.	
ARTICLE I	IV SHARES 15,000	g and educat	ional/training services.	i : Cs
ARTICLE I	IV SHARES 15,000 of shares of stock is:		ional/training services.	
ARTICLE I	IV SHARES 15,000 of shares of stock is:  V OFFICERS AND/OR DIRECTOR	<u>s</u>	Robert Brown, Manager	- Co
ARTICLE I	IV SHARES 15,000 of shares of stock is:  V OFFICERS AND/OR DIRECTOR		Robert Brown, Manager	Co
ARTICLE In the number of the n	IV SHARES of shares of stock is:  V OFFICERS AND/OR DIRECTOR itle: Joel Johnson, Manager	S Name and	Title: Robert Brown, Manager	
ARTICLE In the number of the n	V SHARES 15,000 of shares of stock is:  V OFFICERS AND/OR DIRECTOR itle: Joel Johnson, Manager 3205 Triton Circle Tallahassee, FL 32312 Cathy Drayton, Manager	S Name and Address:	Title: Robert Brown, Manager 3205 Allison Marie Ct. Tallahassee, FL 32304	
ARTICLE IT The number of ARTICLE  Name and Ti  Address:	V SHARES 15,000 of shares of stock is:  V OFFICERS AND/OR DIRECTOR itle: Joel Johnson, Manager 3205 Triton Circle Tallahassee, FL 32312 Cathy Drayton, Manager	S Name and Address:	Title: Robert Brown, Manager 3205 Allison Marie Ct.	
ARTICLE In the number of the n	TV SHARES of shares of stock is:  V OFFICERS AND/OR DIRECTOR itle: Joel Johnson, Manager 3205 Triton Circle Tallahassee, FL 32312 Cathy Drayton, Manager	S Name and Address:  Name and Address:	Title: Robert Brown, Manager 3205 Allison Marie Ct. Tallahassee, FL 32304	
ARTICLE In The number of ARTICLE  Name and Ti  Address:  Name and Ti  Address:	IV SHARES of shares of stock is:  V OFFICERS AND/OR DIRECTOR itle: Joel Johnson, Manager 3205 Triton Circle Tallahassee, FL 32312 Cathy Drayton, Manager 4434 Gearhart Rd., Unit 1205	S Name and Address:  Name and Address:  Address:	Title: Robert Brown, Manager 3205 Allison Marie Ct. Tallahassee, FL 32304	
ARTICLE In The number of ARTICLE  Name and Ti  Address:  Name and Ti  Address:	IV SHARES of shares of stock is:  V OFFICERS AND/OR DIRECTOR  Joel Johnson, Manager  3205 Triton Circle  Tallahassee, FL 32312  Cathy Drayton, Manager  4434 Gearhart Rd., Unit 1205  Tallahassee, FL 32303	Name and Address:  Name and Address:  Name and Address:	Title: Robert Brown, Manager 3205 Allison Marie Ct. Tallahassee, FL 32304  Title:	

The name	and Florida street address (P.O. Box NOT acce	table) of the registered agent is:
Name:	Joel Johnson	
Address:	3205 Triton Circle	
	Tallahassee, FL 32312	
******	***********	*****************
		process for the above stated corporation at the place designated ir nt as registered agent and agree to act in this capacity
	Jan Jan	07/10/2025
	Required Signature/Registered Agent	Date

ARTICLE VI REGISTERED AGENT