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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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# Sunshine State Corporate Compliance Company

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

DATE 01/08/2025	_		₩WALK IN**
ENTITY NAME Bubb	le Technologies, LLC		
DOCUMENT NUMBEI			025 1.1
DOCOMENT NOTIBE	**PLEASE FILE THE ATTAC	CHED AND RETURN**	0
xxxxxxxx	Plain Copy Certified Copy		SE S
	Certificate of Status		
	**PLEASE OBTAIN THE FOLLOWIN  Certified Copy of Arts & Ameno  Certificate of Good Standing		/**
	**APOSTILLE' / NOTARH	AL CERTIFICATION**	
COUNTRY OF DESTIN NUMBER OF CERTIFIC			
TOTAL OWED \$150.	00	ACCOUNT #: 120160	000072
		S R FM	
Please call Tina at	the above number for any issu	ues or concerns. Thank	yoa so much!

#### **Articles of Conversion**

For

### "Other Business Entity"

Into

## Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045. Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articl BUBBLE TECHNOLOGIES, INC.	ies of Cor	regrision	n is:
(Enter Name of Other Business Entity)	- ;-	برين مون	-17
The "Other Business Entity" is a corporation  (Enter entity type. Example: corporation, limited partnership, general partnership, common	<u>;</u> ;;	00	1 1 1
(Enter entity type. Example: corporation, limited partnership, general partnership, common Delaware  First organized, formed or incorporated under the laws of	į.,,	بغ	
on July 24, 2020 (date of organization, formation or incorporation)	i		
<ol> <li>The name of the Florida Limited Liability Company as set forth in the attached Arti BUBBLE TECHNOLOGIES, LLC</li> </ol>	icles of O	rganiz	ation:
(Enter Name of Florida Limited Liability Company)	₽`		
4. If not effective on the date of filing, enter the effective date:  (The effective date: Cannot be prior to date of receipt or filed date nor more than 9 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 dat document's effective date on the Department of State's records.			
5. The plan of conversion has been approved in accordance with all applicable statutes.			

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 8th day of January	20 25
Signature of Authorized Representative of Limi	
Signature of Authorized Representative:  Printed Name: Seth Cohen	Title: General Counsel and Secretary
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Soth Cohon	
Printed Name: Seth Cohen	Title: General Counsel and Secretary
Signature:Printed Name:	Title:
Timed Name.	
Signature:Printed Name:	ent.
Printed Name:	: Title:
Signature:	
Signature:Printed Name:	
Signature:	
Signature:Printed Name:	Title:
Signature:	<u></u>
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In-	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty limited Partnerchin
Signatures of <u>ALL</u> General Partners.	ty istimed t at the snip.
	÷
All others: Signature of an authorized person.	
orginature of an authornied person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional) \$5.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

DUDBLE TECHNOLOG	2150 110	
BUBBLE TECHNOLOG		ability Company, "L.L.C.," or "LLC.")
(Must c	ontain the words. Unfixed Li	ability Company, E.E.C., or C.C.,
ARTICLE II - Addr	ess:	
The mailing address a	and street address of th	e principal office of the Limited Liability Company i
Duinainal Office Ada	<b>1</b>	Mailing Address:
Principal Office Add	iress:	Maning Address.
4211 W. Boy Scout Blv	d., Suite 800	4211 W. Boy Scout Blvd., Suite 800
T EL 22607		
Tampa, FL 33607		Tampa, FL 33607
	stered Agent, Regist	ered Office. & Registered Agent's Signature:
ARTICLE III - Regi (The Limited Liability Composition of the Liability Composit	oany cannot serve as its own! ve Florida registration.)	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another, the registered agent are:
ARTICLE III - Regi (The Limited Liability Compousiness entity with an activ	oany cannot serve as its own! ve Florida registration.)	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
ARTICLE III - Regi (The Limited Liability Compousiness entity with an activ	ony cannot serve as its own! ve Florida registration.) orida street address of orporate Creations Netv	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
ARTICLE III - Regi (The Limited Liability Compounts entity with an active) The name and the Flo	ony cannot serve as its own! ve Florida registration.) orida street address of orporate Creations Netv	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
ARTICLE III - Regi (The Limited Liability Comp business entity with an activ The name and the Flo	only cannot serve as its own! ve Florida registration.) orida street address of orporate Creations Netventon Netvent	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
ARTICLE III - Regi (The Limited Liability Comp business entity with an activ The name and the Flo	only cannot serve as its own! ve Florida registration.) orida street address of orporate Creations Netventon Netvent	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:  work Inc.

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

AR	T	IC	LE	Т	V-
----	---	----	----	---	----

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
MGR	Guided Insurance Solutions, LLC
	4211 W. Boy Scout Blvd., Suite 800
	Tampa, FL 33607
	2
	725
	2025 JAN
(I.I., a) also and (Figure 2000)	
(Use attachment if necessary)	
revolution the street	· · · · · · · · · · · · · · · · · · ·
LE V: Other provisions, if any.	
DEGLIDED CICNATURE	/
<u>REQUIRED</u> SIGNATURE:	

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Seth Cohen

Typed or printed name of signee

#### Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 5.00 Certificate of Status (Optional) \$ 30.00 Certified Copy (Optional)