# P24000646823

(Re	equestor's Name)	<u> </u>
(Ad	dress)	<del></del>
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
<del></del>	<del></del>	

Office Use Only



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RECEIVED



### Sunshine State Corporate Compliance Company

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

DATE 07/16/2024	_			
			₩WAL	<i>K I</i> N**
ENTITY NAME JT2 E	C CORPORATION			
DOCUMENT NUMBER	<b>3</b>			
	**PLEASE FILE THE AT	TACHED AND RETURN**	2	
			2024 JUL	~ <del>~</del>
	Plain Copy		F	6 g 
XXXXXXXX	Certified Copy		16	
	Certificate of Status			
			(C) (c)	4.5
	XXD/EAOE DOTA/N THE ED//D	LUMA END THE APAUE ENTERN	; ;	
	PLEASE UDIAIN THE PULLU	WING FOR THE ABOVE ENTITY		
	Certified Copy of Arts & A	Amendments		
·	Certificate of Good Standing			
	**APOSTILLE' / NOTA	RIAL CERTIFICATION**		
COUNTRY OF DESTINA	ATION			
NUMBER OF CERTIFIC	PATES REQUESTED			
TOTAL OWED \$113.		ACCOUNT #: I201600	000072	
		S. 87/10	<i>(</i>	
DA AA T.				
Please call lina at	the above number for any	issues or concerns. Thank	you so much!	

#### **COVER LETTER**

TO: New Filing Section Division of Corporations				
IT2 EC CORPOR	RATION			
	of Resulting Florida	Profit Corporation		
The enclosed Articles of Conversion, Article entity into a "Florida Profit Corporation" in a	accordance with ss. 6		ert the following elig	gible
Please return all correspondence concerning	inis matter to:			
Lauren Figueroa				
Contact Person				
JT2 EC CORPORATION			207	
Firm/Company			2024 JUL	<u>ا</u>
3014 WEST PALMIRA A	VE #200A		116 6H 9: 47	Carried Land Control
Address				
TAMPA, FL 33629			ب ب	**
City, State and Zip C	ode			
lauran@it2cmi.com				
E-mail address: (to be used for future ar	nnual report notificat	ion)		
	·	,		
For further information concerning this matter	•	567-4397		
Kathy Clark Name of Contact Person	at (800	de and Davtime Telephone N		
Name of Contact Person	Alea CC	ide and Daytime Telephone is	unioci	
Enclosed is a check for the following amount	:			
\$105.00 Filing Fees  \$\square\$	es S113.75 Filing and Certified Co		s,	
Mailing Address:		Street Address:		
New Filing Section Division of Corporations		New Filing Section  Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## 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 JT2 EC CORPORATION	is:		
Enter Name of the Converting Entity			
2. The converting entity is a Corporation			
(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 California		20	
(Enter state, or if a non-U.S. entity, the name of the country)		24 3	
on 1/22/2020		2024 JUL 16	
Enter date "Converting Entity" was first organized, formed or incorporated.  3. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation  JT2 EC CORPORATION	35.7	16 18 9: 117	
Enter Name of Florida Profit Corporation			
4. This conversion was approved by the eligible converting entity in accordance with this chapter at current/organic jurisdiction.	nd the la	iws of i	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 Department of State.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the listed as the document's effective date on the Department of State's records.			

Signed	I this 12 day of June	. 20 24	,
<u>Requi</u>	red Signature for Florida Profit Corporatio	<u>n:</u>	
	ure of Director, Officer, or, if Directors or Officer.  d Name: John Toynten Tirle: Pres	ident	
Requi	red Signature(s) on behalf of Converting Fl	orida partnerships, limited partner	ships, and limited liability
	ure:		
-	ohn Townzen	Title: President	
Signat	ure:		
Printe	i Name:	Title:	
Signat	ure:		
Printed	i Name:	Title:	2024 JUL
Signat	ure:		
Printed	i Name:	Title:	
Signat	ure:		<u> </u>
Printed	i Name:	Title:	5
Signat	ure:		
Printed	i Name:	Title:	
	rida General Partnership or Limited Liabili ure of one General Partner.	ty Partnership:	
	ida Limited Partnership or Limited Liabili ures of <u>ALL</u> General Partners.	ty Limited Partnership:	
	rida Limited Liability Company: ure of a Member or Authorized Representative	·.	
All oth Signati	ners: ure 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)

The name of the corporation shall be: JT2 EC CC	RPORATION
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
-	
Principal street address 3014 WEST PALMIRA AVE #200A, TAMPA, FL 33629	Mailing address, if different is: 2541 N Dale Mabry Hwy, PMB #109, Tampa FL 33607
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Engineering and Construction	<u>1</u>
	t
	. 9
ARTICLE IV SHARES The number of shares of stock is: 20,000	
ARTICLE V OFFICERS AND/OR DIRECTORS	Joelong Townzon, Socretary
Name and Title:  John Townzen, CEO, CFO. President, Director	Name and Title: Joelene Townzen, Secretary
Address: 777 N Ashley Dr., Unit 1316	Address: 777 N Ashley Dr., Unit 1316
Tampa, FL 33602	Tampa, FL 33602
Name and Title:	Name and Title:
Address:	Address:
Name and Title:	Name and Title:
Address:	Address:

#### ARTICLE VI REGISTERED AGENT

The <u>nam</u>	<u>e and Florida street addre</u>	<u>ess</u> (P.O. Box <b>NO</b> T	l'acceptable) of the registered agent is:
Name	<b>URS AGEN</b>	TS, LLC	

Address: 3458 Lakeshore Drive Tallahassee, FL 32312

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Required Signature/Registered Agent Date