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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

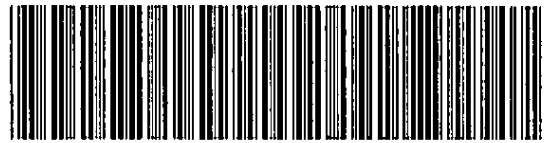
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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# **FL Patel Law**

**P L L C**

Support@flpatellaw.com  
Tel: 727.279.5037  
Fax: 727.888.1294

360 Central Avenue  
Suite 800  
Saint Petersburg, Florida 33701

**July 8, 2022**

*Sent via First Class Mail*

**New Filing Section  
Division of Corporation  
The Centre of Tallahassee  
2415 North Monroe Street  
Suite 810  
Tallahassee, FL 32303**

**RE: Fest Flags LLC**

Dear Secretary of State,

Enclosed are the **(i)** Articles of Conversion for "Other Business Entity" into a Florida Limited Liability Company, **(ii)** the Articles of Organization for Fest Flags LLC, and **(iii)** check #1432 totaling **\$155** for the filing fees and Certificate of Status.

If there are any issues, please contact:

|                    |                               |
|--------------------|-------------------------------|
| Name:              | Ada Reyes                     |
| Firm:              | FL Patel Law PLLC             |
| Address:           | 360 Central Avenue, STE 800   |
| City, State & Zip: | St. Petersburg, FL 33701      |
| Phone:             | 727-279-5037                  |
| E-mail:            | <u>Support@flpatellaw.com</u> |

Very Truly,

Ada Reyes  
Corporate Paralegal & Support

ARTICLES OF CONVERSION

FOR

“OTHER BUSINESS ENTITY”

INTO

FLORIDA LIMITED LIABILITY COMPANY

The Articles of Conversion and attached Articles of Organization are submitted to convert the following “Other Business Entity” into a Florida Limited Liability Company in accordance with Fla. Stat. § 605.1045.

1. The name of the “Other Business Entity” immediately prior to the filing of this Articles of Conversion is: Fest Flags LLC.
2. The “Other Business Entity” is a Limited Liability Company first organized under the laws of the State of California.
3. The “Other Business Entity” was formed on August 9, 2018.
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization is: Fest Flags LLC.
5. The plan of conversion has been approved in accordance with all applicable statutes.
6. This document becomes effective when the document is accepted and filed by Secretary of State.

Signed this July 7, 2022.

**Signature of the Authorized Representative of the Limited Liability Company:**



Signature: \_\_\_\_\_  
Todd Gewolb, Manager

**Required Signatures on behalf of the Other Business Entity:**



Signature: \_\_\_\_\_  
Todd Gewolb, Member

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 TALLAHASSEE, FLORIDA  
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**ARTICLES OF ORGANIZATION**

**FOR**

**FEST FLAGS LLC  
A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I.**

**Name**

The name of the Limited Liability Company is: Fest Flags LLC (the "Company").

**ARTICLE II.**

**Address**

The principal office and mailing address of the Company is:

936 SW 1st Ave Suite 185  
Miami, Florida 33130

**ARTICLE III.**

**Registered Agent, Registered Office, & Registered Agent's Signature**

The name and the Florida Street Address of the Registered Agent are:

FLP RA Services LLC  
360 Central Avenue  
Suite 800  
Saint Petersburg, FL 33701

*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.*

*Ada Reyes*

(sign)

FLP RA Services LLC

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TALLAHASSEE, FLORIDA


**ARTICLE IV.**  
**Authorized Members and Managers**

The Name and Address of each person authorized to manage and control the Limited Liability Company:

| <u>Title</u>                              | <u>Name and Address</u>   |
|---|---|
| AMBR = Authorized Member<br>MGR = Manager |   |
| <u>MGR</u>                                | Todd Gewolb<br>936 SW 1st Ave Suite 185<br>Miami, Florida 33130 |

**ARTICLE V.**

The Effective date shall be the date of filing.

  
\_\_\_\_\_ (sign)

**Signature of a member or an authorized representative of a member.**

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.

\_\_\_\_\_  
Todd Gewolb  
Authorized Representative/Member

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