# 12300028955/

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entry Name)
(Document Number)
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# **COVER LETTER**

Division of C							
SUBJECT: VIXUS IN	NTERNATIONAL INVES	TMENTS LLC					
30b32C1	(Name of Res	ulting Florida Li	mited Cor	mpany)			
				nd fees are submitted taccordance with s. 605			:r
Please return all corre	espondence concernin	g this matter to	<b>)</b> :				
STEFAN BRAGA LEM	os						
	(Contact Person)	· · · · · · · · · · · · · · · · · · ·					
VIXUS INTERNATION	AL INVESTMENTS CO	RP					
	(Firm/Company)				AD.	~2	
8250 EXCHANGE DR	SUITE 134				5	0231	
	(Address)				<u> </u>	MAY	7
ORLANDO, FL 32819					MELANKSSEE, FL	3	
((	City, State and Zip Code)		_		G.	P	
stefan@4youhomes.co	om				THE C	<u></u>	C
E-mail Address: (to b	e used for future annual re	port notifications	)		严疑	94 :	
For further information	on concerning this ma	tter, please cal	1:		1.1		
STEFAN BRAGA LEM	os	_at ( <u>407</u>	, 666	-8777			
(Name of Conta	ct Person)	(Area Co	de) (Da	ytime Telephone Number)			
	or the following amou a bank located in the	•	•	sed by this office mus	t be payabl	e in US	
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□S180.00 Fil and Certified 0		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
Mailing Add	ress:		Stree	et Address:			
New Filing S				Filing Section			
Division of C				sion of Corporations			
P.O. Box 632	1		The (	Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

# **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.

VIXUS INTERNATIONAL INVESTMENTS CORP  P2/000/04608
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
12/15/2021 on
On
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  VIXUS INTERNATIONAL INVESTMENTS LLC  (Enter Name of Florida Limited Liability Company)
(Enter Name of Prorida Limited Clabinty 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 90 calendar days after 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 date will not be listed as the 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 <u>08</u>	day of MAY	2023 .	
Signature of Author	rized Representative	e of Limited Liability Compa	
Signature of Authori Printed Name: STEFA	zed Representative: _ AN BRAGA LEMOS	Tyle: MANAGER	
Signature(s) on beha	Nof Other Business	Entity: [See below for require	ed signature(s)]
Signature: Printed Name: STEFA	W BRAGA LEMOS	Title: PRESIDENT	
Signature:		Title:	
	·		
		Title:	
Signature:Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature: Printed Name:		Title:	
	n, Vice Chairman, Dir	rector, or Officer. ted, an Incorporator must sign.	
If Florida General P Signature of one Gen	<del>-</del>	d Liability Partnership:	
If Florida Limited P Signatures of ALL G		d Liability Limited Partnershi	<u>p:</u>
All others: Signature of an autho	rized person.		
Fees:			

\$25.00

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Articles of Conversion:

Certified Copy:

Certificate of Status:

Fees for Florida Articles of Organization:

S TALLAMASSEF

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICL	🗄 1 - Name:
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The name of the Limited Liability Company is:

#### VIXUS INTERNATIONAL INVESTMENTS LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	<u>wratting Address:</u>	
8250 EXCHANGE DR	8250 EXCHANGE DR	
SUITE 134	SUITE 134	
ORLANDO, FL 32809	ORLANDO, FL 32809	•

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

BIT PARTNERS TAX COMP	LIANCE SERVICES LLC
Nam	e
7680 UNIVERSAL BLVD SUI	TE 380
Florida street address (P.C	D. Box <u>NOT</u> acceptable)
ORLANDO	FL 32819
City	Zip

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)

Registered Agent's Signature (REQUIRED)

Registered Agent's Signature (REQUIRED)

#### ARTICLE IV-

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
AMBR	L&L INTERNATIONAL INVESTMENT LLC	
	8250 EXCHANGE DR SUITE 134	
	ORLANDO, FL 32809	
AMBR	J MONTEIRO INVESTMENT LLC	
	8250 EXCHANGE DR SUITE 134	
	ORLANDO, FL 32809	
MGR	STEFAN BRAGA LEMOS	
	8250 EXCHANGE DR SUITE 134	
	ORLANDO, FL 32809	
(Use attachment if necessary)	<b>1</b>	202
CLE V: Other provisions, if any.	ALLAHAS	2023 MAY 31
	That	<u>t.</u>
REQUIRED SIGNATURE	A Paris	94:

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.

STEFAN BRAGA LEMOS

Typed or printed name of signee

## Filing Fees

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