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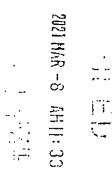
(Requestor's Name)
(Address)
(Address)
(1.00000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





700357057257

01/04/21--01031--012 **150.00



Wal Loster

COVER LETTER

TO: New Filing Section Division of Corporations	S	•	٠		Ř.	
SUBJECT: OBG Capital LLC						
	(Name of Result	ing Florida Limit	ed Com	pany)		
The enclosed Articles of Converge Business Entity" into a "Florida"		_				
Please return all correspondence	concerning t	his matter to:				
Teddy Barzilai						
(Contact F	Person)					
Tadmor T Barzilai CPA Inc						
(Firm/Cor	прапу)	•				
4501 Mission Bay Dr Ste 3A						303
(Addre	ess)					==
San Diego, CA 92109						1 89
(City, State an	d Zip Code)					
elena@teddyaccounting.com						8 AHH: 3
E-mail Address: (to be used for fut	ture annual repor	t notifications)			4	
For further information concern	ing this matte	r, please call:				C
Teddy Barzilai	i	at (<u>858</u>	274-5	573		
(Name of Contact Person)		(Area Code)	(Dayt	time Telephone Number	r)	
Enclosed is a check for the follo dollars and drawn on a bank loc	•	•	rocess	ed by this office mu	st be payab	le in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	_	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees Certified Copy, and Certificate of Status	.	
Mailing Address:			Street	Address:		
New Filing Section				iling Section		
Division of Corporations	S			on of Corporations		
P.O. Box 6327			i ne Ci	entre 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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: OBG Capital Inc
(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.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
01/31/2020
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: OBG Capital LLC
(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 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 23 day of December	20 <i>20</i> .
Signature of Authorized Representative of Lin	nited Liability Company:
Signature of Authorized Representative: Printed Name: Ofir Bar	Title: Owner
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Printed Name: Teddy Barzilai	
Printed Name: Teddy Barzilai	Title: Incorporator
Signature:	
Printed Name:	Title:
	_
Signature:	m: d
Printed Name:	True:
Signature:	
Signature: Printed Name:	Title:
Signature:	Tr'd
Printed Name:	1 ide:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Ir	Officer. acorporator must sign.
If Florida General Partnership or Limited Liabil Signature of one General Partner.	ity Partnership:
If Florida Limited Partnership or Limited Liabil Signatures of ALL General Partners.	ity Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00

Certified Copy: Certificate of Status:

\$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp	oany is:	·
OBG Capital LLC		
(Must contain the words "Limite	ed Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address o	of the principal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
18555 Collins Ave Apt 2305	4501 Mission Bay Dr Ste 3A	
Sunny Isles Beach, FL 33160	San Diego, CA 92109	
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address Ofir Bar	of the registered agent are:	·
	Name	
18555 Collins Ave Apt		
Florida street addre	ss (P.O. Box NOT acceptable)	
Sunny Isles Beach	FL 33160	•
City	Zip	
registered agent and agree to act in this	nated in this certificate, I hereby accepts accepts accepts accepts accepts to comply the comply to the comply the complex to accept the complex accepts and accepts accepts accepts and accepts accepts accepts and accepts accepts accepts and accepts accep	ot the appointment as with the provisions of all I am familiar with and
		296
Registered Agen	t's Signature (REQUIRED)	1 Table
(CC	ONTINUED)	X-8 - 27 - 27 - 27 - 27 - 27 - 27 - 27 -

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

"AMBR" = Authorized Member		
"MGR" = Manager MGR	Ofir Bar	
	18555 Collins Ave Apt 2305	_
	Sunny Isles Beach, FL 33160	
		
		
(Use attachment if necessary)		
`	,	
(Use attachment if necessary) LE V: Other provisions, if any.		
LE V: Other provisions, if any.	1/2	
LE V: Other provisions, if any.		
LE V: Other provisions, if any. REQUIRED SIGNATURE:		
LE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of	r an authorized representative of a member	are that
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance on the following of the content of the c	and an experientative of a member	are that
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	r an authorized representative of a member the with section 605.0203 (1) (b), Florida Statutes. I am awas tument to the Department of State constitutes a third degree	are that
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	r an authorized representative of a member	are that