## A21000000389

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

Office Use Only



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#### **COVER LETTER**

And the second second

TO: Registration Section Division of Corporations						
SUBJECT: Eiserkolb USA, LP  Name of Resulting Florida Limited Partnership or Limited Liability Limited Partnership						
The enclosed Certificate of Conversion, Certificate of Limited Partnership, and fees are submitted to convert an "Other Organization" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s. 620.2104, F.S.						
Please return all correspondence concerning this matter to:						
Craig W. Young, Esy.						
Cur Legal & Countries LLC Firm/Company						
2500 Quantum Lakes Dr., Suite 100 Address						
Boynton Beach, FL 33426 City. State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Name of Contact Person at (S61) 568 - 1000  Area Code and Daytime Telephone Number						
Enclosed is a check for the following amount:						
☐ \$1.052.50 Filing Fees Fees, (\$52.50 for Conversion and \$1,000 - Certificate)  ☐ \$1.061.25 Filing Fees and Certified Copy Status ☐ \$1.105.00 Filing Fees and Certified Copy Certificate of Status						
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303						

### **Certificate of Conversion**

For

### "Other Business Organization"

Into

#### Florida Limited Partnership or Limited Liability Limited Partnership

This Certificate of Conversion and attached Certificate of Limited Partnership are submitted to convert the following "Other Business Entity" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s.620.2104, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
E 15 42 k of b USA LP  (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a longed Partwork p  (Enter entity type. Example: corporation, limited liability company, sole
(Enter entity type. Example: corporation, limited liability company, sole proprietorship, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of Texas
(Enter state, or if a non-U.S. entity, the name of the country)
on 7/13/2017 (Enter date "Other Business Entity" was first organized, formed or incorporated)
3. The name of the Florida Limited Partnership or Limited Liability Limited Partnership as set forth in the attached Certificate of Limited Partnership:
Eisenkalb USA, LP (Enter Name of Florida Limited Partnership or Limited Liability Limited
(Enter Name of Florida Limited Partnership or Limited Liability Limited Partnership)
4. The conversion was approved as required by Chapter 620, F.S., and was approved in such a manner that complied with the converting organization's governing law.
5. If not effective on the date of filing, enter the effective date: 5/1/2001.  (The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)
6. The conversion is permitted by the applicable law(s) governing the other business entity and the other business entity complies with such law(s) in effecting the conversion.
7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

Signed this 30 day of Ap-1	. 20_21
Signature of Each General Partner Listed in Attacle Partnership/Limited Liability Limited Partnership that the facts stated in this document are true. Any fals degree felony as provided for in s.817.155, F.S.	: Individuat(s) signing affirm(s)
Signature:  Printed Name: Village Kayper 1	itle: Oww
Signature: Printed Name:	
Signature: T	itle:
Signature:	itle:
Signature:	itle:
Signature:	itle:
Required Signature(s) on behalf of Other Business E that the facts stated in this document are true. Any fall degree felony as provided for in s.817.155, F.S. [See E Signature:  Printed Name: U. Lee, K. S.	se information constitutes a third selow for required signature(s).]
It Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Off If Directors or Officers have not been selected, an Incorp	icer.
If Florida General Partnership or Limited Liability Signature of one General Partner.	<sup>2</sup> artnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	
All others: Signature of an authorized person.	
Fees:  Certificate of Conversion: Fees for Florida Certificate of Limited Partnersh (\$965 Filing Fee and \$35 Filing Fee) Certified Copy: Certificate of Status:	\$ 52.50 ip: \$1,000.00 \$ 52.50 (Optional) \$ 8.75 (Optional)

# CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

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Name of Registered Agent for Service of Process  4. 1500 Questa Likes Or. Sie 100, Boyata Beach FC 3342(  Florida street address for Registered Agent  5. 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 relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent.  Signature of Registered Agent	Acceptai	Eisenkolb USA, LP  ame of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) ble Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. ble Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
Florida street address for Registered Agent  5. 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 relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent.  Signature of Registered Agent	2	Street address of initial designated office
comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent.  Signature of Registered Agent		
5	omply v	with the provisions of all statutes relative to the proper and complete performance of my duties, in familiar with an accept the obligations of my position as registered agent.
Mailing address of initial designated office	б	

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Apr. 1		2021	
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