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| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
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| Codification of Chattan |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer; |
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Office Use Only



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N. Outline P. F. T. C. 13



February 18, 2015

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re:

Order #: 9446683 SO

Customer Reference 1: None Given Customer Reference 2:

None Given

Dear Department of State, Florida:

Please obtain the following:

Sweetener Solutions, LLC (FL) Conversion Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092.

Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist

COVER LETTER

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| TO: Registration Division of | Section Corporations | | | |
|---|--|---|---|--|
| SUBJECT. Sweet | ener Solutions, LLC | | | |
| SOBJECT | Name of Florida | Limited Liability Compar | ny | |
| | es of Conversion and foompany" into an "Othe | | | |
| Please return all cor | respondence concernin | g this matter to: | | |
| Michael T. Lasky | | | | |
| | Contact Person | | | |
| Sweetener Solution | ons, LLC | | | |
| | Firm/Company | 7.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4 | | |
| 74 Columbia Driv | e, Suite G | | | |
| Pooler, GA 31322 | Address City, State and Zip Code | | | |
| | City, State and Zip Code | | | |
| | | | | |
| E-mail address: (t | o be used for future annual i | report notification) | | |
| For further information concerning this matter, please call: | | | | |
| | | at () | | |
| Name of Contact Person Are | | Area Code and Day | ytime Telephone Number | |
| Enclosed is a check for the following amount: | | | | |
| □ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee and Certificate of Status | ☐\$55.00 Filing Fee and Certified Copy | ☐ \$60.00 Filing Fee, Certified Copy, and Certificate of Status | |
| STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 CR2E106 (07/14) | | MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 | | |

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Articles of Conversion For Florida Limited Liability Company Into "Converted or Other Business Entity"

The Articles of Conversion is submitted to convert the following Florida Limited Liability Company into an "Other Business Entity" in accordance with s. 605.1045, Florida Statutes.

| 大学の | 1987年 | 1987年 | 1987年 | 1988年 | 1988年

· 最級在城門衛門以下衛門

| 1. The name of the Florida Limited Liability Company converting into the "Other Business Entity" is: | | | | |
|---|--|--|--|--|
| Sweetener Solutions, LLC LD2-26796 | | | | |
| Enter Name of Florida Limited Liability Company | | | | |
| 2. The name of the "Converted or Other Business Entity" is: | | | | |
| Sweetener Solutions, LLC | | | | |
| Enter Name of "Converted or Other Business Entity" | | | | |
| 3. The "Converted or Other Business Entity" is a limited liability company | | | | |
| (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.) | | | | |
| organized, formed or incorporated under the laws of | | | | |
| (Enter state, or if a non-U.S. entity, the name of the country) on February 18, 2015 | | | | |
| Date of organization, formation or incorporation) | | | | |
| and the formation document is attached (if applicable). | | | | |
| 4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S. | | | | |
| 5. This conversion shall be effective in Florida on: February 18, 2015 | | | | |
| The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date of the conversion under the aws governing the "Other Business Entity.") | | | | |
| | | | | |

| | or Other Business Entity" is an out-of-st r Florida, the "Converted or Other Busine | | | |
|---|--|---|--|--|
| | llowing street and mailing address of an estate may send and process served on the Chapter 48. | | | |
| Street Address: | 74 Columbia Drive, Suite G | | | |
| Mailing Address: | Pooler, GA 31322 | | | |
| | 74 Columbia Drive, Suite G | | | |
| | Pooler, GA 31322 | | | |
| 7. The "Converted or appraisal rights the and 605.1061-605. | Other Business Entity" has agreed to pay amount to which such members are entit 1072, F.S. | y any members having tled under ss. 605.1006 | | |
| Signed this <u>18th</u> | day of February | , 20 <mark>2015</mark> | | |
| Signature: Mu | charl T. Lashy | | | |
| Must be signed by a Member of Authorized Representative | | | | |

Michael T. Lasky

Printed Name:

Fees: Filing Fee: Certified Copy:

Certificate of Status:

Page 2 of 2

\$30.00 (Optional)

\$5.00 (Optional)

\$25.00

Authorized Representative

2015 FEB 18 AH 9: 51