LIIDOMARIA

(Re	equestor's Name)	
(Address)		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	. #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	·
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



900188825649

12/20/10--01024--007 **35.00

06/14/11--01032--005 **115.00

THE END

D. BRUCE.
JUN 14 2011
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
	of Resulting Florida Limited Company)
	Articles of Organization, and fees are submitted to convert an Limited Liability Company" in accordance with s. 608.439, F.S.
Please return all correspondence concern	ning this matter to:
FABIS TOMASS (Contact Person) EZ / 2 TRADE, Contact Person) [Firm/Company) 19// Sw 100 st Ave (Address) [Address] [City, State and Zip Code in Lo Pez 12 Trade. Contact Person) [Name of Contact Person]	STE. G STE. G SECRETARY SECRETARY SEE STANDS OPT notifications)
Enclosed is a check for the following am	, , ,
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy \$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate 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.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of
Conversion is: EZ 12 TRADE CORP.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION 1/1000035912 (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of FLORIDA (Enter state, or if a non-U.S. entity, the name of the country)
on 03-24-20/0 . (Enter date "Other Business Entity" was first organized, formed or incorporated)
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the which it is now organized, formed or incorporated:
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
EZ 12 TRADE, LLC (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
5. If not effective on the date of filing, enter the effective date: (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 listed in the attached Articles of Organization, if an effective date is listed therein.)
6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.608.439, F.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 3 day of February	ery 20 17-	
Signature of Member or Authorized Rep	resentative of Limited Liability Company ated in this document are true. Any false inf	
Signature of Member or Authorized Representation Name: FAR Tomosso	entative: PRESIDENT	/ = -
	ntity: Individual(s) signing affirm(s) that the ion constitutes a third degree felony as proventure(s).	
Signature. Printed Name: FA3	Elle Title: PRESIDENT	
Signature: Augric Africa Africa Name: Mario Africa	menerTitle: Sacratury	-
Signature: Printed Name:	Title:	
Signature:Printed Name:	Title:	<u> </u>
Signature:Printed Name:	Title:	— .
Signature:Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Direct If Directors or Officers have not been selected.	ctor, or Officer.	ASSEE, FLB
If Florida General Partnership or Limited Signature of one General Partner.		OS ALÉ RISA
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	Liability Limited Partnership:	
All others: Signature of an authorized person.		
Fees:	•	
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) Page 2 of 2	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

EZIZ TRADE, LLC		
(Must end with the words "Limited Liability Company, the abbrev	viation "L.L.C.," or the designation "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the prin	cipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
1911 SW LOBST AVE	SAME	
MIDAMAR FL 33025		
ARTICLE III - Registered Agent, Registered C (The Limited Liability Company cannot serve as its own Registere business entity with an active Florida registration.)		ن د م
The name and the Florida street address of the reg	ristered agent are:	L.
FASIO TON	MASE/10	
]	Name	
19460 NW	S7th PL	نسنذا
Florida street address (F	P.O. Box NOT acceptable)	

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 608, F.S.

HIALEAH FL 33015
City, State, and Zip

Registered Agent's Signature (REQUIRED

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Membe	
M6P	FAQUE TOMASE/lo 19460 NW 57th PI MISNI EL 33015
MGR	MAZIA TOMASEllo 19460 NW 57th PL MIAMI, FL 33015
(Use attachment if necessary)	
(The effective date: 1) cannot be pri	than the date of filing: (OPTIONAL) In to nor more than 90 days after the date this document is filed by (ID 2) must be the same as the effective date listed in the attached live date listed therein.)
REQUIRED SIGNATURE:	an authorized representative of a member.
(In accordance with section 608.408()	, Florida Statutes, the execution of this document constitutes an affirmation under tated herein are true. I am aware that any false information submitted in a constitutes a third degree felony as provided for in s.817.155 F.S.)
- FAB S	
Тур	ed or printed name of signee
	Page 2 of 2