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| (Re | questor's Name) | |
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| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| · (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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2015 JUN -3 PN 2: 19
SECHETARY OF STATE

N. Cumgan JUN 3 - 2015

COVER LETTER

| Division of Corporations |
|--|
| SUBJECT: Tazmanian Holdings Group, LLC (Name of Resulting Florida Limited Company) |
| The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S. |
| Please return all correspondence concerning this matter to: |
| Louise James |
| Same (Contact Person) |
| 23938 Sardina Or |
| (Address) (City, State and Zip Code) (City, State and Zip Code) E-mail Address: (to be used for future annual report notifications) |
| For further information concerning this matter, please call: |
| (Name of Contact Person) at (380) 717 8092 (Area Code) (Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\begin{array}{c} \$150.00 Filing Fees and Certificate of Status \end{array} \$\$180.00 Filing Fees and Certified Copy & Certificate of Status \end{array} \$\$Certificate of Status |
| STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 |

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 11, 2015

LOUISE JAMES 23938 SARDINA DRIVE SORRENTO, FL 32776

SUBJECT: TAZMANIAN HOLDINGS GROUP LLC

Ref. Number: W15000033291

RECEIVED

15 JUN -3 PM 1: 28

SECRETARGE F STATE

We have received your document for TAZMANIAN HOLDINGS GROUP LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 115A00009851

FILED

2015 JUN -3 PN 2: 19

SECRETARY OF STATES TALLAHASSEE, FLORIDA

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: |
|--|
| (Enter Name of Other Business Entity) 2. The "Other Business Entity" is a |
| First organized, formed or incorporated under the laws of Nevada on OH OH IH (date of organization, formation or incorporation) (Enter state, or if a non-U.S. entity, the name of the country) |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: 102 Man an Holding Group LLC (Enter Name of Florida Limited Liability Company) |
| 4. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to date of receipt or filed date 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.) 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. |

Page 1 of 2

| Signed this 24 th day of April | 20_\5 |
|--|--|
| Signature of Authorized Representative of Limi | |
| Signature of Authorized Representative: | Title: Dresident |
| Signature(s) on behalf of Other Business Entity: | See below for required signature(s)] |
| Signature: Mose Same S Printed Name: Locks Same S | |
| Printed Name: Locuse Sames | Title: President |
| Signature: | |
| Signature:Printed Name: | Title: |
| Signature: | |
| Signature: Printed Name: | Title: |
| Signature: | |
| Signature: Printed Name: | Title: |
| Signature: | |
| Signature:Printed Name: | Title: |
| Signature: | |
| Signature: Printed Name: | Title: |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of If Directors or Officers have not been selected, an Inc. | |
| If Florida General Partnership or Limited Liabilit Signature of one General Partner. | ty Partnership: |
| If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners. | ty Limited Partnership: |
| All others: Signature of an authorized person. | |
| Fees: | |
| Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: | \$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| The name of the Limited Liability Company is: |
|--|
| Tazmanian Holdings Group, LL (Must end with 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: Mailing Address: |
| 23938 Sardinia Dr. |
| Sorrento, F132776 Same |
| 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: |
| Joseph A Loguidice CPA |
| Joseph A Loguidice CPA 1515 A Ridgewood Ave. |
| Florida street address (P.O. Box NOT acceptable) Florida street address (P.O. Box NOT acceptable) FL 32117 |
| 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)

Page 1 of 2

| Title: | Name and Address: |
|--|---|
| "AMBR" = Authorized Member "MGR" = Manager M C | Louise James 23 938 Sardinia Dr. Sorcento, F. (32776) |
| | |
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| effective date is listed, the date must h | date of filing: OPTIONAL) oe specific and cannot be more than five business days |
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| ICLE V: Effective date, if other than the a effective date is listed, the date must he 90 days after the date of filing.) If the date inserted in this block does not meet the detay of the ent's effective date on the Department of State's included in the Depar | or an authorized representative of a member. (3), Florida Statutes, the execution of this document lities of perjury that the facts stated herein are true. omitted in a document to the Department of State ded for in s.817.155, F.S.) |
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