# L15000/18595

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

Office Use Only

300273800773

07/16/15--01006--012 \*\*132.50

06/19/15--01016--020 \*\*52.50

T. Bush JUL 113 200

# **COVER LETTER**

<b>TO:</b> Amendment Section Division of Corporations	
SUBJECT: Vecstar, Inc.	
	a Profit Corporation
The enclosed Certificate of Conversion and Profit Corporation into an "Other Business	fee(s) are submitted to convert a Florida Entity" in accordance with s. 607.1113, F.S.
Please return all correspondence concerning	g this matter to:
Yelena Possina	
Contact Person	
Vecstar, Inc.	
Firm/Company	
5301 NW 2nd Ave, #20	7
Address	
Boca Raton, FL 33487	• ·
City, State and Zip Code	
vecstarinc@gmail.com	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this mat	ter, please call:
Yelena Possina	at (561 )294-6129
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amount	nt:
\$35.00 Filing Fee and Certificate of Status	\$43.75 Filing Fee and Certified Copy Certified Copy, and Certificate of Status
STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: V Amendment Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



June 26, 2015

YELENA POSSINA 5301 NW 2ND AVE #207 BOCA RATON, FL 33487

SUBJECT: VECSTAR, INC. Ref. Number: W15000044010

We have received your document for VECSTAR, INC. and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$132.50. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

You have submitted the wrong type of form, proper forms are enclosed.,

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) 245-6052.

Letter Number: 815A00013494

Tim Burch Regulatory Specialist II

www.sunbiz.org

# **Articles of Conversion**

For

#### "Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization 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:  Vecstary Inc.  (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>Corporation</u> (Enter entity type. Example: corporation, limited partnership,
general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of $\frac{F/orida}{\text{(Enter state, or if a non-U.S. entity, the name of the country)}}$ on $\frac{O7/19/2014}{\text{(date of organization, formation or incorporation)}}$
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Vecstar, 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 13 day of July	20 15			
Signature of Authorized Representative of Limit	ted Liability Company:			
Signature of Authorized Representative: Yelena Possina	eleva Possino- Title: MGR			
Signature(s) on behalf of Other Business Entity: [				
Signature: Yelena hossina Printed Name: Yelena Possina				
Printed Name: Yelena Possina	Title: Director			
Signature:Printed Name:	Title:			
Signature:Printed Name:				
Signature:	*	Š		
Printed Name:	-		<u>5</u>	
Signature:Printed Name:	Title:	25 A	=	
			υ U	
Signature:Printed Name:	Title:	17. TE	7	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	Officer.	SAFE ORIOA	B T	•
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:			
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y 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

ARTICLE I - Name The name of the Lim		Company is	s:						
Ve	ecstar	, LLC.							
(Must	end with the word	<b>I</b> s "Limited Liab	ility Company,	, "L.L.Ç.," o	r "LLC.")				
ARTICLE II - Add The mailing address		dress of the p	orincipal of	fice of the	e Limite	ed Liabil	ity Co	mpany	y is:
Principal Office Ad	dress:		Mailing	Addres	<u>s:</u>				
5301 NW 2"	! Ave#	207	530	I NW	2nd	Ave	世	207	}
Boca Raton,	FL3348	7	Bock	a Ro	ton,	F63.	<u>39</u> 8	17	
ARTICLE III - Reg (The Limited Liability Com- business entity with an act	npany cannot serve	e as its own Reg							
The name and the Fl	orida street ac	dress of the	registered	agent are	:	,		رهب	
-		na Po					ELAH.	5 JUL 15	er comm
		inan	ne		_		25 E	ப	j j
Ç	5301 N	jw j <sup>n</sup>	" Hue	. #j	07			P	ع مدرو إلى اع
	Florida street	address (P.	Э. Вох <u><b>NO</b></u>	$\underline{\mathbf{T}}$ accepta	ıble)		型の	1	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	Boca	Raton City	FL	334	87		DENIE DENIE	धन भ	Ers <sup>‡</sup>
_		City		Zip			<b>&gt;</b>		

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

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR.	Yelena Possina 5301 NW 2nd Ave #207 Boca Raton, FL 33487
<del></del>	Sec 5   Se
(Use attachment if necessary)	e date of filing: (OPTIONAL)
TICLE V: Effective date, if other than the n effective date is listed, the date must be 90 days after the date of filing.)  If the date inserted in this block does not meet the nent's effective date on the Department of State's	e date of filing: (OPTIONAL)  be specific and cannot be more than five business days  the applicable statutory filing requirements, this date will not be listed.
TICLE V: Effective date, if other than the n effective date is listed, the date must be 90 days after the date of filing.)  If the date inserted in this block does not meet the nent's effective date on the Department of State's	e date of filing: (OPTIONAL)  be specific and cannot be more than five business days  the applicable statutory filing requirements, this date will not be listed.
FICLE V: Effective date, if other than the n effective date is listed, the date must be 90 days after the date of filing.)  If the date inserted in this block does not meet the nent's effective date on the Department of State's FICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:	e date of filing: (OPTIONAL)  be specific and cannot be more than five business days  the applicable statutory filing requirements, this date will not be listed.
PICLE V: Effective date, if other than the n effective date is listed, the date must be r 90 days after the date of filing.)  If the date inserted in this block does not meet the ment's effective date on the Department of State's FICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member (In accordance with section 605.0205 constitutes an affirmation under the penal I am aware that any false information sul constitutes a third degree felony as provi	e date of filing:

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