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(Re	questor's Name)	
(Ad	dress)	
(Ād	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
·W/6-1274	4	





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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FIKH TIME INC

(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:

Hans Peder Hagalund

(Contact Pulseh)

Fika Time inc

(Firm/Company)

1319 Toxton lane
(Address)

Cvicdo FL 32765

[City, State and Zip Code)

Peder Hagalund 1@ hot mail
E-mail Address: (to be user for future annual report notifications)

For further information concerning this matter, please call:

Teder Hagglund at (Ho7) 247-4822

(Name of Contact Person) (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)

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STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



February 22, 2016

HNA PEDER HAGGLUND 1319 FOXTON LANE OVIEDO, FL 32765

SUBJECT: FIKATIME, INC Ref. Number: W16000012741

We have received your document for FIKATIME, INC 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.

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return the corrected original and one copy of 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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 016A00003551



March 28, 2016

HANS PEDER HAGGLUND 1319 FOXTON LANE OVIEDO, FL 32765

SUBJECT: FIKA TIME, INC Ref. Number: W16000012741

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

You failed to make the correction(s) requested in our previous letter.

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 file the 2016 Annual Report for P14000085282.

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

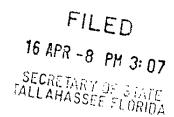
If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 016A00003551

Valerie Herring Regulatory Specialist II New Filing Section

www.sunbiz.org

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 Corporation (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) (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Central Florida Green Solutions 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.

Signed this 15 day of January	_20_ 1b	FILED
Signature of Authorized Representative of Limit	ted Liability Company:	16 APR -8 PH 3: 07
Signature of Authorized Representative: Printed Name: Peder Haggland	Title: CEO	SECRETARY OF STATE TALLAHASSEE FLORIDA
Signature(s) on behalf of Other Business Entity: [· · · · · · · · · · · · · · · · · · ·
Signature: Printed Name: Peder Hagglund	_Title: _CEO	
Signature:Printed Name:	Title	
Signature: Printed Name:		
Signature: Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of the Directors or Officers have not been selected, an Inc.	Officer.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	y Limited Partnership:	
All others: Signature of an authorized person.		
<u>Fees:</u>		
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 Limited Liability Company is:

Central Florida Green Solution (Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1319 Foxton lane Ovicdo, FL 32765	1319 Foxton lane Oviedo, FL 32765
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the remainder of the r	red Agent. You must designate an individual or applied a property of the prope
<u>Chiedo</u> City	FL 32765 Zip
liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as regi	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S

Page 1 of 2

(CONTINUED)

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	er
"MGR" = Manager MGR	Peder Hagglund
	1319 Foxton lanc
	Ovicao FL 32765
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effective date is listed, the date days after the date of filing.)	nan the date of filing: (OPTIONAL) must be specific and cannot be more than five business days
CLE V: Effective date, if other the effective date is listed, the date days after the date of filing.)	must be specific and cannot be more than five business days t meet the applicable statutory filing requirements, this date will not be liste f State's records.
CLE V: Effective date, if other the effective date is listed, the date of days after the date of filing.) The date inserted in this block does not at seffective date on the Department of	must be specific and cannot be more than five business days t meet the applicable statutory filing requirements, this date will not be liste f State's records.
CLE V: Effective date, if other the effective date is listed, the date of days after the date of filing.) The date inserted in this block does not's effective date on the Department of the CLE VI: Other provisions, if any	must be specific and cannot be more than five business days t meet the applicable statutory filing requirements, this date will not be liste f State's records.
CLE V: Effective date, if other the effective date is listed, the date of days after the date of filing.) The date inserted in this block does not at a effective date on the Department of the CLE VI: Other provisions, if any EXECUTED SIGNATURE: Signature of a man This document is executed an aware that any false.	must be specific and cannot be more than five business days t meet the applicable statutory filing requirements, this date will not be liste f State's records.
CLE V: Effective date, if other the effective date is listed, the date of days after the date of filing.) The date inserted in this block does not at a effective date on the Department of the CLE VI: Other provisions, if any EXECUTED SIGNATURE: Signature of a man This document is executed an aware that any false.	must be specific and cannot be more than five business days t meet the applicable statutory filing requirements, this date will not be liste f State's records. ember or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State

ARTICLE IV-