# 47000138186

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
-	(Business Entity Name)
<u> </u>	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	s to Filing Officer:

Office Use Only



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#### **COVER LETTER**

	Filing Se	ection orporations				
		•				
SUBJECT:	3 OF HEA	ARTS, LLC	liina Planida Limit	ad Cor		
		(Name of Kes	ulting Florida Limit	ea Cor	mpany)	
The enclosed Business Ent	l Article: tity" into	s of Conversion, Artic a "Florida Limited Li	les of Organizati ability Company	on, an	nd fees are submitted to convert an "Caccordance with s. 605.1045, F.S.	)the
Please return	all corre	espondence concernin	g this matter to:			
Christopher A.	DiSchino	, Esq.				
		(Contact Person)		•		
DiSchino & Co	ompany, P	LLC				
		(Firm/Company)		-		
4770 Biscayne	Blvd., Su	ite 1280				
		(Address)		-		
Miami, Florida	33137					
	((	City, State and Zip Code)		-		
christopher@d	smiami.co	អា				
E-mail Add	ress: (to b	e used for future annual re	port notifications)	-		
For further in	nformati	on concerning this ma	tter, please call:			
Christopher Di	Schino		_at (	581-	-2542	
(Name of Contact Person)		(Area Code)	(Day	nytime Telephone Number)		
		or the following amou a bank located in the		roces	ssed by this office must be payable in	US
\$150.00 File (\$25 for Conve & \$125 for Art of Organization	rsion icles	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET A	DDRES	S:	MAIL	ING A	ADDRESS:	
New Filing S					Section	
Division of C Clifton Build	•	ions	Divisio P. O. B		Corporations	
CHROH Danc	5		1.0.1	VJ	<i>→</i> • •	

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

### **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:  3 OF HEARTS, INC.
(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)
May 19, 2017
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: 3 OF HEARTS, 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 calendar 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.
6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to



Signed this 13th day of July	20_17
Signature of Authorized Representative of Limit	
Signature of Authorized Representative: Printed Name: Robin Popelsky	Title: Manager
Signature(s) on behalf of Other Business Entity:	
Signature: Printed Name: Robin Popelsky	
Printed Name: Robin Popelsky	Title: President
Signature:Printed Name:	
Printed Name:	_ Title:
Signature:Printed Name:	The state of the s
Printed Name:	_ title:
Signature:Printed Name:	Title
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	
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.	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)

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

3 OF HEARTS, LLC	
(Must contain the words "Limite	d Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address o	f the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
511 LUCERNE AVE	511 LUCERNE AVE
STE 503	STE 503
LAKE WORTH, FL 33460	LAKE WORTH, FL 33460
business entity with an active Florida registration.)  The name and the Florida street address	of the registered agent are:
•	
The name and the Florida street address	of the registered agent are:  Name
The name and the Florida street address  ROBIN POPELSKY  511 LUCERNE AVE, S	of the registered agent are:  Name
The name and the Florida street address  ROBIN POPELSKY  511 LUCERNE AVE, S Florida street addres  LAKE WORTH	of the registered agent are:  Name  TE 503 ss (P.O. Box NOT acceptable)  FL 33460
The name and the Florida street address  ROBIN POPELSKY  511 LUCERNE AVE, S Florida street addre	of the registered agent are:  Name  TE 503 ss (P.O. Box NOT acceptable)

(CONTINUED)

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<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	ROBIN POPELKSY	
	511 LUCERNE AVE, STE 503	
	LAKE WORTH, FL 33460	
(Use attachment if necessary)  CLE V: Effective date, if other than the effective date is listed, the date must	e date of filing: (OPTION	NAL) s days
CLE V: Effective date, if other than the effective date is listed, the date must 90 days after the date of filing.)	the applicable statutory filing requirements, this date will not	s days
CLE V: Effective date, if other than the effective date is listed, the date must 90 days after the date of filing.) If the date inserted in this block does not meet ent's effective date on the Department of State	the applicable statutory filing requirements, this date will not	s days
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CLE V: Effective date, if other than the effective date is listed, the date must 90 days after the date of filing.)  If the date inserted in this block does not meet ent's effective date on the Department of State  (CLE VI: Other provisions, if any.  OSE: ANY AND ALL LAWFUL BUSINESS  REQUIRED SIGNATURE:  Signature of a member of the degree felong and aware that any false inform constitutes a third degree felong ROBIN POPELSKY	the applicable statutory filing requirements, this date will not 's records.  er or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes: mation submitted in a document to the Department of State	s days be liste 17 Jul. 21 314 9: 3

The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-