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Special Instructions to F	iling Officer:	

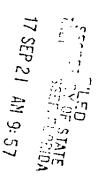
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COVER LETTER

TO:	New Filing Se Division of Co				
SUBJ	ECT:	(Name of Res	G. L. Coulding Florida Limited Con	npany)	
				d fees are submitted to coccordance with s. 605.10	
Please	return all corre	spondence concerning	g this matter to:		
	Dien	(Contact Person)	· · · · · · · · · · · · · · · · · · ·		
		(Firm/Company)			
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For fu	rther information	on concerning this ma	tter, please call:		
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		or the following amou a bank located in the		sed by this office must be	e payable in US
(\$25 fo & \$125	0.00 Filing Fees r Conversion For Articles inization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	77 S
New I Divisi Clifto 2661	ET ADDRESS Filing Section on of Corporati n Building Executive Center cassee, FL 3230	ons er Circle	MAILING A New Filing S Division of C P. O. Box 63 Tallahassee.	Section Corporations 27	17 SEP 21 AM 9:57

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.

Statutes.
The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: ### The Name of Other Business Entity (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 Florida (Enter state, or if a non-U.S. entity, the name of the country)
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 4/18/2017 (The effective date: 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.) 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 which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

	•
Signed this Sopt day of 18	_ 20
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name:	Title: Marager
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature:	
Signature: Printed Name: Dien Ngingen	Title: Manager
	<u> </u>
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	m: I
Printed Name:	Inte:
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 In-	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> 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

ARTICLE 1 - Name:

The name of the Limited Liability Company is:				
Star NG Limited Liability Comp	chity longary			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:				
Principal Office Address: Ma	ailing Address:			
150661 SR 200 Krit 5 4 Callahan, FL 32011 7	1631 Read Back Lr.			
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 registe	ered agent are:			
Dies Nguyen Name				
Florida street address (P.O. Box NOT acceptable)				
Jax City	FL 32246 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 (CONTINUED	7 SEF			

Company: Title:	Name and Address:		
"AMBR" = Authorized Member "MGR" = Manager	Dien reguger A631 Rober Bark for Jak pt 32246		
	7 SEP 21		
(Use attachment if necessary)	AM 9: 5		
ARTICLE V: Other provisions, if any.	7 o A		
REQUIRED SIGNATURE:			
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony		
Pier A	ped or printed name of signee		

Filing Fees
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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

ARTICLE IV-