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(Requestor's Name)					
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PICK-UP WAIT MAIL					
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SEGRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: New Filing S Division of C			
SUBJECT:	ant sabar	S O C Consulting Florida Limited Con	29195 CC
			d fees are submitted to convert an "Other coordance with s. 605.1045. F.S.
Please return all corre	espondence concerning	g this matter to:	
Kym	Spurgin		
((Contact Person)		
3802 Fal	(Firm/Company) SC(est C()		
	(Address)		
Clerma	AT FC 31	4711	
((City, State and Zip Code)	,	
	o hotenail.		
E-mail Address: (to b	e used for future annual re	port notifications)	
For further information	on concerning this ma	tter, please call;	
Kum	JO XCO O	11(407) 5	-475883
(Name of Conta	ict Person)	at (407) 5 (Area Code) (Day	time Telephone Number)
	or the following amou a bank located in the		sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	S:	MAILING A	ADDRESS:

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

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

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) (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>CXO</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
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Lightsabes + Legings LL (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 2/20/17 The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after he 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 ocument's effective date on the Department of State's records.
. The plan of conversion has been approved in accordance with all applicable statutes.
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.
FILED 17 DEC 14 AM SEGMETARY DESTRICTARIASSEE, FLO

Signed this 30 day of NN	20_(
Signature of Authorized Representative of Lim	ited Liability Company:				
Signature of Authorized Representative: Printed Name: Wyw Swy W					
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]				
Signature: YWM Sargin	Title:CED	_			
Signature:Printed Name:	Title:	_			
Signature: Printed Name:	Title:	<u> </u>			
Signature:Printed Name:	Title:	- -			
Signature: Printed Name:	Title:	_ _			
Signature:Printed Name:	Title:	-			
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.					
ignature of one General Partner. Florida General Partnership or Limited Liability Partnership: □ Image: Partner Partner					
Florida Limited Partnership or Limited Liability Limited Partnership:					
Il others: gnature of an authorized person.					
<u>:s:</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:						
(Must contain the words "Limited Liability Company, "L\L.C.," or "LLC.")						
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liab	oility C	ompar	ny is:		
Principal Office Address: 3802 Fell Screet-Cir Clemont Fu	Mailing Address:					
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:						
Sanchez & Egge Name	brecht, P.A.	SEORE F	17 DEC	<u></u> 1		
37 North Orange. Florida street address (P:0.	Ave, Suite 500 Box NOT acceptable)	ART OF	I L AM	LE		
<u>Orlando</u> City	FL 32801 Zip	STATE FLORIDA	1 9: 45	0		
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						

(CONTINUED)

Registered Agent's Signature (RECURED)

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ARTICLE IVThe name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Kym Sowgm 3862 Fallscrost Cir Chemont te 24711
	17 DEC SEGGEL AHLAHA
(Use attachment if necessary) ARTICLE V: Other provisions, if any.	CIL AM 9:4 HASSEE, FLORI
	Š Š
REQUIRED SIGNATURE:	
This document is executed in accordance w	n authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aware that ent to the Department of State constitutes a third degree felony
Type	ed 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)