# 118000001136

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

Office Use Only



100305914151

11/28/17--01013--019 \*\*43.75

12/11/17--01017--013 \*\*106.25

18 JAN -2 PH 12: 02
SHURE THREE OF STATE
TALL AHASSEE, FLORIDA

JAN 03 37 1

T SCHROEDER

#### **COVER LETTER**

TO: New Filing So Division of Co						
SUBJECT:	FERRER DESKI					
	(Name of Res	ulting Florida Limited Con	ipany)			
			d fees are submitted to convert an "Othe ecordance with s. 605.1045, F.S.			
Please return all corre	espondence concerning	g this matter to:				
NATHAN	I FERRER					
	(Contact Person)					
	(Firm/Company)					
90 HIDDE	(Address)	#112				
SANFOR	2D , FWPIDA 32 City, State and Zip Code)	713				
	I. FEBRER @ YAH	w.com				
	e used for future annual re					
For further information	on concerning this mat	tter, please call:				
NATHAN FE	PPER	_at ( <u>407</u> ) 3 (Area Code) (Day	340-5736			
(Name of Conta	ct Person)	(Area Code) (Day	rtime 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		New Filing Section				
Division of Corporat	ions	Division of Corporations				
Clifton Building	on Cinal	P. O. Box 6327				
2661 Executive Cent	er Circle	rananassee,	Tallahassee, FL 32314			

Tallahassee, FL 32301

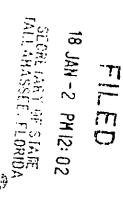
## Articles of Conversion For "Other Business Entity"

#### 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:  FERRER DESIGN GROUP, INC. 113-35941
(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 FUFTA
(Enter state, or if a non-U.S. entity, the name of the country)
on MAY 1, 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:  FERRER DEGIAN AROUP, V.L.C.
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 01/01/18
(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



Signed this 27 day of DECEMBER	_ 20 17	
Signature of Authorized Representative of Limit	ited Liability Company:	
Signature of Authorized Representative:  Printed Name: NATHAN FEPPER	Title: CEO	·
Signature(s) on behalf of Other Business Entity:		
Signature: Nathan FERRER	T:1	_ <del>_</del>
Printed Name: NATHAN FEFFE	Intle:	
Signature: Printed Name:	m'.d	<del></del>
Printed Name:	1 itte:	
Signature:Printed Name:	Title	_ <del>_</del>
Signature:Printed Name:	Title:	<del></del>
Signature:Printed Name:	Title:	<u> </u>
Signature: Printed Name:	Title:	<del></del>
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 ALL General Partners.	ty Limited Partnership:	18 JA 18 JA SECRE
All others: Signature of an authorized person.		JAN -2 PHIZ CRETARY OF SI
Fees:		PM 12: 02  OF STATE ELFLORION
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	72 107 107

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limit	ed Liability Company is	s:		
F	ERPER DESIAN A	AROUP. L.L.	.C.	
	ntain the words "Limited Liabi			
ARTICLE II - Addre The mailing address an		principal offi	ce of the Limit	ed Liability Company is:
Principal Office Add	ress:	Mailing	Address:	
90 HIDDEN LAKE	DRIVE, 112	90	HIDDEN WAKE	OPIVE.112
SANFORD, FLURID			FORD, FLORI	<del></del>
The name and the Flor	ida street address of the		gent are:	
	NATHAN F			
	Nan			
-	96 HIPDEN LAKE lorida street address (P.)			
	_		- · ·	
-	SANFORD City	<u> </u>	<u>32713</u> Zip	
liability company registered agent and statutes relating to	as registered agent and at the place designated agree to act in this capa the proper and complete	to accept ser in this certificacity. I further performance egistered age	vice of process cate, I hereby ac er agree to comp e of my duties, c ent as provided j	for the above stated limited ccept the appointment as oly with the provisions of all and I am familiar with and for in Chapter 605, F.S
				PH IN

A	R	Т	Ī	C	ı	Æ	1	V	_

The 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 MAR	MIZZY E. FERRER 90 HIDDEN LAKE DRIVE, 112 SANFORD, FLORIDA 32773
	SEGRE A
(Use attachment if necessary)	ARY OF STA
ARTICLE V: Other provisions, if any.	
	্ৰান্ত বিষ্ণু 
REQUIRED SIGNATURE:	Pathar Form -
Signature of a member or 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
NA	THAN FERRER
Ту	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)