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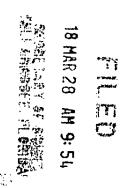
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificate | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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APR 02 2018 T SCHROEDER

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.

| | (Enter Name of Other Business Entity) |
|---|---|
| | limited liability company |
| 2. The "Other Business (Enter entity) | s Entity" is a |
| | Georgia |
| First organized, formed | or incorporated under the laws of |
| September 30, 2009 | (Effet state, of It a first close entity, the name of the evaluation) |
| (date of organization, fo | ormation or incorporation) |
| 3. The name of the Flo | rida Limited Liability Company as set forth in the attached Articles of Organization: |
| The Best Trainer, LLC | |
| <u></u> | (Enter Name of Florida Limited Liability Company) |
| | annot be prior to date of receipt or filed date nor more than 90 calendar days atter |
| the date this documen Note: If the date inserted in document's effective date o | annot be prior to date of receipt or filed date nor more than 90 calendar days after at is filed by the Florida Department of State.) In this block does not meet the applicable statutory filing requirements, this date will not be listed as the in the Department of State's records. On has been approved in accordance with all applicable statutes. |

| Signed this day of | 20_18 |
|---|--|
| Signature of Authorized Representative of Limit | ted Liability Company; |
| Signature of Authorized Representative: | 1/0200111 |
| Printed Name: Marcelo Vazquez | Tille: Manager |
| Signature(s) on behalf of Other Business Entity: | |
| Signature: / W. F. VON ROLLY Printed Name: Marcelo (Staguez) | Title: Manager |
| Printed Name: Mattero(Areguess | 1 IIIC: Ividiages |
| Signature: | |
| Printed Name: | _ Title: |
| Signatura | |
| Signature: | |
| | |
| Signature: | Thirt |
| Printed Name: | Title: |
| Signature: | |
| Printed Name: | |
| Signature: | |
| Printed Name: | Title: |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc. | Officer. |
| 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: |
| All others: Signature of an authorized person. | |
| Fces: | |
| 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 F | LORIDA LIMITED LI | ABILITY COMPANY |
|--|-----------------------------------|----------------------------|
| ARTICLE I - Name: The name of the Limited Liability Company is | o• | |
| The name of the Edinted Elabitity Company is | 5 , | |
| The Best Trainer, LLC | | |
| (Must contain the words "Limited Liebi | lity Company, "L.L.C.," or "LLC," |) |
| | | • |
| ARTICLE II - Address: The mailing address and street address of the | principal office of the Lim | ited Liability Company is: |
| Principal Office Address: | Mailing Address: | |
| 4158 Arikaree Court | 4158 Arikaree Court | |
| Jacksonville, Florida 32223 | Jacksonville, Florida 3222 | 3 |
| | | |
| ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Regions business entity with an active Florida registration.) | | |
| The name and the Florida street address of the | e registered agent are: | |
| Marcelo Vazquez | | |
| Na | me | |
| 4158 Arikaree Court | | |
| | O. Box NOT acceptable) | |
| Jacksonville | FL 32223 | |
| City | Zip | • |
| • | • | |
| Having been named as registered agent and | | |
| llability company at the place designated registered agent and agree to act in this cap | | |
| statutes relating to the proper and complet | | |
| accept the obligations of my position as | | |
| huck longues | 7J | |
| Registered Agent's S | ignature (REQUIRED) | - - 16 |
| (CONT | INUED) | MAR 28 AM |
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| ART | | ٠н. | 10 | - |

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

| <u>Title:</u> | Name and Address: |
|--|--|
| "AMBR" = Authorized Member | |
| "MGR" = Manager | |
| MGR | Marcelo Vazquez |
| | 4158 Arikarce Court |
| | Jacksonville, Florida 32223 |
| | |
| MGR | Laura Vazquez |
| | 4158 Arikaree Court |
| | Jacksonville, Florida 32223 |
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| (Use attachment if necessary) | |
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| CLE V: Other provisions, if any. | |
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| , | |
| <u>reouired</u> signature: | ** |
| Mr. Atton many | |
| Mus 5 Vargelley | |
| Signature of a member or | r an authorized representative of a member |
| This document is executed in accordance | ce with section 605.0203 (1) (b), Florida Statutes. I am aware the |
| any laise information submitted in a doc | ament to the Department of State constitutes a third degree lefor |
| This document is executed in accordance | r an authorized representative of a member ce with section 605.0203 (1) (b), Florida Statutes. I am awar current to the Department of State constitutes a third degree |
| | |

Marcelo Vazquez

Typed 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)