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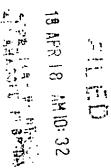
(Requ	estor's Name)	
(Addre	ess)	
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(City/S	State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Busin	ness Entity Nar	ne)
(Docu	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fil	ing Officer:	
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Office Use Only



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# COVER LETTER

Division of C	orporations			
SURJECT: MOCAM	A BREWING COMPANY	Y. LLC		
3003EC1.	A BREWING COMPANY (Name of Res	sulting Florida Limi	ed Con	npany)
				d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:		
TREVOR BREWER				
	(Contact Person)	· <u>-</u> .	•	
BREWERLONG PLLC				
	(Firm/Company)		-	
620 N WYMORE RD, S	TE 270			
	(Address)		-	
MAITLAND, FL 32751				
((	City, State and Zip Code)		-	
TBREWER@BREWER	LONG.COM			
E-mail Address: (to b	e used for future annual re	port notifications)	•	
For further information	on concerning this ma	tter, please call;		
TREVOR BREWER		at ( 407	, 660-2	2964 rtime Telephone Number)
(Name of Conta	ct Person)	(Area Code)	(Day	time Telephone Number)
	or the following amou a bank located in the		rocess	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 and Certified Cop		□\$185.00 Filing Fees. Certified Copy, and Certificate of Status
STREET ADDRESS	S:			ADDRESS:
New Filing Section		New Fi		
Division of Corporati Clifton Building	ons	Divisio P. O. B		orporations 27
2661 Executive Cent	er Circle			FL 32314

Tallahassee, FL 32301

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**TO:** New Filing Section

# **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: MOCAMA BREWING COMPANY, INC. $29923921$
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a FLORIDA PROFIT CORPORATION  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc."
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
3/5/2018 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
MOCAMA BREWING COMPANY, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 3/5/2018
(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 12 day of April	20_18		
Signature of Authorized Representative of Limit			
Signature of Authorized Representative:  Printed Name: MICHAEL OLIVERI	Title: MANAGER		
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s)		
Signature: Printed Name: MICHAEL OLIVERI	TLA. DDECHMENT		
Signature:Printed Name:	Title:		
Signature:Printed Name:			
Printed Name:	Title:		
Signature:Printed Name:	Title:		
Signature: Printed Name:	Title:		
Signature:Printed Name:			
Printed Name:	Title:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or C	Officer.		
If Directors or Officers have not been selected, an Inc			
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.		4PR 18	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of <u>ALL</u> General Partners.		 AH 10: 32	m O
All others: Signature of an authorized person.		32	
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:	
MOCAMA BREWING COMPANY, LLC	<del></del>	
(Must contain the words "Limited Liab	oility Company, "L.L.C.," or "L	J.C ")
ARTICLE II - Address: The mailing address and street address of the	principal office of the l	Limited Liability Company is:
Principal Office Address:	Mailing Address:	
629 S. 8TH STREET	629 S. 8TH STREET	
FERNINDINA BEACH, FL 32034	FERNINDINA BEAC	CH, FL 32034
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)  The name and the Florida street address of the	gistered Agent. You must desig	
BREWERLONG PLLC		
Na	me	
620 N WYMORE RD, STE 2	70	
Florida street address (P		le)
MAITLAND	FL 32751	
City	Zip	
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the properland comple accept the obligations of my position as	l in this certificate. I her pacity I further agree to te performance of my du registered agent as prov	eby accept the appointment as comply with the provisions of all ties, and I am familiar with and
Registered Agent > S	ignature (REQUIRED)	
(CONT	INUED)	APR 18 AH

### ARTICLE IV- +

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

Name and Address:	
MICHAEL ÖLIVERI	
PERNINDINA DEACH, PL 32034	
•	
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	THE REPORT OF
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	Ψ. ω
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	MICHAEL OLIVERI 629 S. 8TH STREET FERNINDINA BEACH, FL 32034

# **REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

MICHAEL OLIVERI, MANAGER

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)