L1800128073

(F	Requestor's Name)
(A	Address)
(<i>F</i>	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(C	Document Number)
Certified Copies	Certificates of Status
Special Instructions t	o Filing Officer:

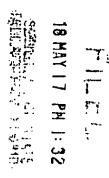
Office Use Only

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COVER LETTER

· ·					
TO: New Filing Sec Division of Cor					
SUBJECT: homeangel.	LLC				
	(Name of Res	ulting Florida Lim	ited Con	npany)	
The enclosed Articles of Business Entity" into a					
Please return all corres	pondence concerning	g this matter to:			
Ed Tsuji					11 10 10 10 10 10 10 10 10 10 10 10 10 1
	(Contact Person)				で
MyCompanyWorks, Inc.					
	(Firm/Company)		_		7
187 E. Warm Springs Road	d, Suite B				- 10
	(Address)		_		63° W
Las Vegas, NV 89119					
(Ci	ty, State and Zip Code)		_		
orders@mycompanyworks	.com				
E-mail Address: (to be	used for future annual re	port notifications)	_		
For further information	n concerning this ma	tter, please call:			
Ed Tsuji		_at (362-2	2677	
(Name of Contact	Person)		e) (Day	time Telephone Number)	_
Enclosed is a check for dollars and drawn on a			process	sed by this office must	be payable in US
(\$25 for Conversion	□\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing and Certified Co		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS:		MAIL	ING A	ADDRESS:	
New Filing Section		New F	Filing S	ection	
Division of Corporatio	ns			Corporations	
Clifton Building 2661 Executive Center	Circle		3ox 63 assee	27 FL 32314	
				,	

Tallahassee, FL 32301

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

homeangel, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
2. The "Other Business Entity—is a
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
03/10/2016 on
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
homeangel, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: 1) 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; AND 2) must be the same as the
effective date listed in the attached Articles of Organization, if an effective date is listed therein.) 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.

	20_18
Signature of Authorized Representative of Lin	
Signature of Authorized Representative:	
Printed Name: Changzheng Tan	Title: Manager
Timed Name. Omnigueing Tur	ride, Manager
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
\sim	• • • • • • • • • • • • • • • • • • • •
Signature:	
Printed Name: Changzheng Tan	Title: Authorized Representative
Signature:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature: Printed Name:	Title
Frince Name:	i ide:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation;	
Signature of Chairman, Vice Chairman, Director, of	or Officer.
If Directors or Officers have not been selected, an	incorporator must sign.
If Florida General Partnership or Limited Liab	
If Florida General Partnership or Limited Liab	
If Florida General Partnership or Limited Liab Signature of one General Partner.	ility Partnership:
If Florida General Partnership or Limited Liab Signature of one General Partner. If Florida Limited Partnership or Limited Liab	ility Partnership:
If Directors or Officers have not been selected, an If Florida General Partnership or Limited Liab Signature of one General Partner. If Florida Limited Partnership or Limited Liab Signatures of ALL General Partners.	ility Partnership:
If Florida General Partnership or Limited Liab Signature of one General Partner. If Florida Limited Partnership or Limited Liab Signatures of ALL General Partners. All others:	ility Partnership:
If Florida General Partnership or Limited Liab Signature of one General Partner. If Florida Limited Partnership or Limited Liab Signatures of ALL General Partners. All others:	ility Partnership:
If Florida General Partnership or Limited Liab Signature of one General Partner. If Florida Limited Partnership or Limited Liab Signatures of ALL General Partners. All others: Signature of an authorized person.	ility Partnership:
If Florida General Partnership or Limited Liab Signature of one General Partner. If Florida Limited Partnership or Limited Liab	ility Partnership:
If Florida General Partnership or Limited Liab Signature of one General Partner. If Florida Limited Partnership or Limited Liab Signatures of ALL General Partners. All others: Signature of an authorized person. Fees: Articles of Conversion:	ility Partnership: ility Limited Partnership: \$25.00
If Florida General Partnership or Limited Liab Signature of one General Partner. If Florida Limited Partnership or Limited Liab Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:	ility Partnership: ility Limited Partnership: \$25.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

the name of the	Limited Liability Compar	ny is:	
homeangel, LLC			
	Must contain the words "Limited I	Liability Company, "L.L.C.," or "LL.C.")	
ARTICLE II - /	Address:		
		the principal office of the Limited	Liability Company i
Principal Office	e Address:	Mailing Address:	
122 Hamilton Park	Dr., Unit1 H1	122 Hamilton Park Dr., Unit1 H	I 1
Tallahassee, FL 323	304	Tallahassee, FL 32304	
ranamissee, rt. 32.	307	Tallanassee, PL 32304	···
Tallallassee, FL 32.	304	Tatianassee, PL 32304	
ARTICLE III - The Limited Liability business entity with a	Registered Agent, Regist Company cannot serve as its own an active Florida registration.) The Florida street address of	stered Office, & Registered Agen i Registered Agent. You must designate an inc	t's Signature: lividual or another
ARTICLE III - The Limited Liability business entity with a	Registered Agent, Regist Company cannot serve as its own an active Florida registration.) e Florida street address of InCorp Services, Inc.	stered Office, & Registered Agent Registered Agent. You must designate an inc	fividual or another
ARTICLE III - The Limited Liability business entity with a	Registered Agent, Regist Company cannot serve as its own an active Florida registration.) The Florida street address of InCorp Services, Inc. 17888 67th Court North	stered Office, & Registered Agen i Registered Agent. You must designate an inc	fividual or another
ARTICLE III - The Limited Liability business entity with a	Registered Agent, Regis Company cannot serve as its own an active Florida registration.) e Florida street address of InCorp Services, Inc. 17888 67th Court North Florida street address	stered Office, & Registered Agent Registered Agent. You must designate an incomment of the registered agent are: Name (P.O. Box NOT acceptable)	fividual or another
ARTICLE III - The Limited Liability business entity with a	Registered Agent, Regist Company cannot serve as its own an active Florida registration.) The Florida street address of InCorp Services, Inc. 17888 67th Court North	stered Office, & Registered Agent Registered Agent. You must designate an incomment of the registered agent are: Name	fividual or another

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.

____Sarah Balen, Assistant Secretary

Registered Agent's Signature (REQUIRED)

(CONTINUED)

"AMBR" = Authorized Memi	Name and Address:
"MGR" = Manager)C1
MCR — Manager	Changzheng Tan
WOR	122 Hamilton Park Dr., Unit1 H1
	Tallahassee, FL 32304
	257
	0
	36.7
	(.)
(Use attachment if necessary)	
(Use attachment if necessary)	
•	than the date of filing: (OPTIONAL)
CLE V: Effective date, if other	
CLE V: Effective date, if other effective date is listed, the date of filing.	than the date of filing: (OPTIONAL) e must be specific and cannot be more than five business days
CLE V: Effective date, if other effective date is listed, the date 0 days after the date of filing. If the date inserted in this block does	than the date of filing: (OPTIONAL) e must be specific and cannot be more than five business days not meet the applicable statutory filing requirements, this date will not be liste
CLE V: Effective date, if other effective date is listed, the date of filing.	than the date of filing: (OPTIONAL) e must be specific and cannot be more than five business days not meet the applicable statutory filing requirements, this date will not be liste
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CLE V: Effective date, if other effective date is listed, the date 0 days after the date of filing. If the date inserted in this block does not's effective date on the Department	than the date of filing: e must be specific and cannot be more than five business days not meet the applicable statutory filing requirements, this date will not be liste of State's records.
CLE V: Effective date, if other effective date is listed, the date 0 days after the date of filing. If the date inserted in this block does not's effective date on the Department CLE VI: Other provisions, if are	than the date of filing: (OPTIONAL) e must be specific and cannot be more than five business days not meet the applicable statutory filing requirements, this date will not be liste of State's records. y.
CLE V: Effective date, if other effective date is listed, the date 0 days after the date of filing. If the date inserted in this block does not's effective date on the Department	than the date of filing: (OPTIONAL) e must be specific and cannot be more than five business days not meet the applicable statutory filing requirements, this date will not be liste of State's records. y.

ARTICLE IV-

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)

Typed or printed name of signee

Changzheng Tan, Manger