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(Requestor's N	lame)
(Address)	
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(City/State/Zip	/Phone #)
PICK-UP WA	MAIL MAIL
(Business Enti	ty Name)
(Document Nu	mber)
Certified Copies Certi	ficates of Status
Special Instructions to Filing Office	er:
W18-415	34

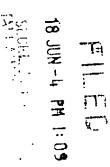
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COVER LETTER ·

TO: New Filing Section Division of Corporations
SUBJECT: Madeira USA LLC
(Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Oth Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Stephen Sacco
Stephen Sacco (Contact Person) Madeira USA LLc (Firm/Company) 30 Bay Side Lour + (Address) Laconic NH 03246
30 Bay Side Court (Address)
La Conic NH 03246 (City. State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Stiphen Sace at (See) 225-3001 X 109 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
☐ \$150.00 Filing Fees (\$25 for Conversion & and Certificate of Status of Organization) ☐ \$180.00 Filing Fees and Certificate of Status ☐ \$180.00 Filing Fees and Certified Copy & Certified Copy & Certificate of Status
STREET ADDRESS:MAILING ADDRESS:New Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsClifton BuildingP. O. Box 6327

Tallahassee, FL 32314

2661 Executive Center Circle

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.

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)
2. The "Other Business Entity" is a LTD Corporation. limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of New Hamp Shire (Enter state, or if a non-U.S. entity, the name of the country)
on September 1 2019 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: Stptember 12017 (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 <u>27</u> day of <u>March</u>	20 8	
	Signature of Authorized Representative of Lin	· · · · · · · · · · · · · · · · · · ·	
: 1	Signature of Authorized Representative: 1	Title: Triarre - Director	ed Finance
•	Signature(s) on behalf of Other Business Entity:	(See below for required signature(s))	
	Signature: Step No. SA-CC.		-
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5	Signature:Printed Name:		_
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<u>]</u>	If Florida Corporation: Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an I	r Officer.	
] S I S	If Florida Corporation: Signature of Chairman, Vice Chairman, Director, o	r Officer. ncorporator must sign. lity Partnership:	
	If Florida Corporation: Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an Interpretate of Chairman of Interpretate of Chairman, Director, of Interpretate of Interpretate of Chairman of Interpretate of Chairman of Chairma	r Officer. ncorporator must sign. lity Partnership:	
	If Florida Corporation: Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an Interpretate of Chairman of Limited Liabi Signature of one General Partner. If Florida Limited Partnership or Limited Liabi Signatures of ALL General Partners. All others:	r Officer. ncorporator must sign. lity Partnership: lity Limited Partnership:	
	If Florida Corporation: Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an Interpolated General Partnership or Limited Liabi Signature of one General Partner. If Florida Limited Partnership or Limited Liabi Signatures of ALL General Partners. All others: Signature of an authorized person. Fees: Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy:	r Officer. ncorporator must sign. lity Partnership: lity Limited Partnership: \$25.00 \$125.00 \$30.00 (Optional)	
	If Florida Corporation: Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an Interpolated General Partnership or Limited Liabi Signature of one General Partner. If Florida Limited Partnership or Limited Liabi Signatures of ALL General Partners. All others: Signature of an authorized person. Fees: Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy:	r Officer. ncorporator must sign. lity Partnership: lity Limited Partnership: \$25.00 \$125.00 \$30.00 (Optional)	
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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	ity Company, "L.L.C.," or "L.L.C.,")
ARTICLE II - Address:	
The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
30 Bayside Court	Laconia NH 13246
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	d Office, & Registered Agent's Signature:
The name and the Florida street address of the	registered agent are:
InCorp Servic	es, Inc.
Nam	e 111
17888 (7 14 (out North
Florida street address (P.C	D. Box NOT acceptable)
Loxah atchee	Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete	o accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 605, F.S
	Brittney Winder on behalf of InCorp Services, In

(CONTINUED)

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager _AMSL	Shirty Clark 34 Bayard C+ Laconic NH 03241
Amor	Stephen Saca 31 Bayside CT
	Laconic Nr. 63246
(Use attachment if necessary)	ディス で
CLE V: Other provisions, if any,	
REQUIRED SIGNATURE:	Care
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This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware that nent to the Department of State constitutes a third degree felon

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)