L1800/6/433

(Re	equestor's Name))
(Ac	ddress)	.
(Ac	ldress)	
(Ci	ty/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

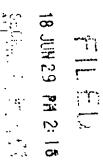
Office Use Only

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COVER LETTER

TO: New Filing Son Division of C				
SUBJECT: PremaPla	y LLC			
	(Name of Res	ulting Florida Limited Co	nipany)	_
		_	nd fees are submitted to accordance with s. 605.1	
Please return all corre	espondence concerning	g this matter to:		
Rebecca Dray				
	(Contact Person)			
PremaPlay LLC				
	(Firm/Company)			
465 S Orlando Ave, Suite	e 320			
	(Address)			
Maitland, FL 32751-565-	4			
	City, State and Zip Code)			
premaplan	agmail a	oM		
	e used for future annual re			The Ta
For further information	on concerning this ma	iter, please call:		18 JUN 29 FR
Rebecca Dray		_at (<u>407</u>) <u>790-</u> .	5601	5 63
(Name of Conta	ect Person)	(Area Code) (Da	ytime Telephone Number)	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
	or the following amou a bank located in the		sed by this office must b	
\$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 ADDRES	S:	MAILING A	ADDRESS:	
New Filing Section		New Filing S		
Division of Corporat Clifton Building	ions	Division of G P. O. Box 63	Corporations	
2661 Executive Cent	er Circle	Tallahassee,		

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 Art PremaPlay Inc (Enter Name of Other Business Entity)	icles of Conversion is:
PremaPlay Inc (Enter Name of Other Business Entity)	-0 1
2. The "Other Business Entity" is a Corporation (Enter entity type. Example: corporation, limited partnership, general partnership, com	amon law or business trust etc.)
(Enter charry type: Example: conportation, inflined plantier stup: general plantier stup:	infolician of business dust, etc.)
First organized, formed or incorporated under the laws of	the name of the country)
on 06/09/2014 (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached A	rticles of Organization:
PremaPlay LLC	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: (The effective date: Cannot be prior to date of receipt or filed date nor more than 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 document's effective date on the Department of State's records.	n 90 calendar days after
5. The plan of conversion has been approved in accordance with all applicable statute	2S.
 The "Converted or Other Business Entity" has agreed to pay any members having appropriate which such members are entitled under ss. 605.1006 and 605.1061-605.1072. F.S. 	raisal rights the amount to

Signed this 11th day of June	_ 20_18
Signature of Authorized Representative of Limit	
Signature of Authorized Representative: Printed Name: Rebecca Dray	Title: AMBR .
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature:	
Printed Name: Rebecca Dray	Title: Director
Signature:	
Signature:Printed Name:	
Signature	
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
Signature: Printed Name:	Title:
Timed ivane.	
Signature:Printed Name:	Title
Printed Name:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	v Limited Partnership:
All others: Signature of an authorized person.	
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

RTICLE I - he name of th	ne Limited Liability Company	is:	
remaPlay LLC			
	(Must contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
RTICLE II	- Address		
		e principal office of the Limited Liabilit	y Company i
rincipal <u>Offi</u>	ce Address:	Mailing Address:	-
rinerpai <u>Orri</u>	THE CHIEF	Manning redefector	
	. Cuita D	465 S Orlando Ave, Suite 320	
00 Westwood Si	q. Suite 12	40.5 & Chando Ave, anne 520	
	q, sune D	Maitland, FL 32751-5654	_
V Hwy 426 Oviedo, FL 3276 RTICLE III he Limited Liabil	5-8849 - Registered Agent, Register lity Company cannot serve as its own R		anothe 🕳
Hwy 426 viedo, FL 3276 RTICLE III he Limited Liabil ousiness entity with	5-8849 - Registered Agent, Registe	Maitland, FL 32751-5654 ered Office, & Registered Agent's Sign egistered Agent. You must designate an individual or	anothe 🕳
V Hwy 426 Oviedo, FL 3276 ARTICLE III The Limited Liabil business entity with	5-8849 I - Registered Agent, Register lity Company cannot serve as its own R th an active Florida registration.) the Florida street address of the Rebecca Dray	Maitland, FL 32751-5654 ered Office, & Registered Agent's Sign egistered Agent. You must designate an individual or	anothe 🕳
V Hwy 426 Oviedo, FL 3276 ARTICLE III The Limited Liabil business entity with	5-8849 I - Registered Agent, Register lity Company cannot serve as its own R th an active Florida registration.) the Florida street address of the Rebecca Dray	Maitland, FL 32751-5654 ered Office, & Registered Agent's Sign egistered Agent. You must designate an individual of the registered agent are:	anothe 🕳
The Limited Liabil business entity wit	5-8849 I - Registered Agent, Register lity Company cannot serve as its own R th an active Florida registration.) the Florida street address of the Rebecca Dray No. 465 S Orlando Ave. Suite 326	Maitland, FL 32751-5654 ered Office, & Registered Agent's Sign egistered Agent. You must designate an individual of the registered agent are:	anothe 6
V Hwy 426 Oviedo, FL 3276 ARTICLE III The Limited Liabil business entity with	5-8849 I - Registered Agent, Register lity Company cannot serve as its own R th an active Florida registration.) the Florida street address of the Rebecca Dray No. 465 S Orlando Ave. Suite 326	Maitland, FL 32751-5654 ered Office, & Registered Agent's Sign egistered Agent. You must designate an individual or the registered agent are: ame	anothe 🕳
V Hwy 426 Oviedo, FL 3276 ARTICLE III The Limited Liabil business entity with	5-8849 I - Registered Agent, Register lity Company cannot serve as its own R than active Florida registration.) the Florida street address of the Rebecca Dray No. 465 S Orlando Ave. Suite 326 Florida street address (I	Maitland, FL 32751-5654 ered Office, & Registered Agent's Sign egistered Agent. You must designate an individual or the registered agent are: ame 0 P.O. Box NOT acceptable)	anothe 🕳

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Rebecca Dray
	298 S Steinbach Rd
	Dexter, MI 48130
	24 0
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(Use attachment if necessary)	
(,	
CLE V: Other provisions, if any.	
	<u> </u>
DECHIDED SIGNATURE:	
REQUIRED SIGNATURE:	2
REQUIRED SIGNATURE:	186- Contract of the Contract
	n authorized representative of a member
Signature of a member or a This document is executed in accordance w	n authorized representative of a member with section 605,0203 (1) (b), Florida Statutes. I am aware th
Signature of a member or a This document is executed in accordance wany false information submitted in a docum	vith section 605.0203 (1) (b), Florida Statutes. I am aware th
Signature of a member or a This document is executed in accordance w	n authorized representative of a member with section 605,0203 (1) (b), Florida Statutes. I am aware the to the Department of State constitutes a third degree felo

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)