# 1800/94471

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

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### **COVER LETTER**

TO: New Filing Sec Division of Cor				
SUBJECT: DOW	NE ASTEV	Hemp Fay	m LLC	
		-	d fees are submitted to co cordance with s. 605.104	
Please return all corres	pondence concerning	this matter to:		
Elijah Von Von DeBan	DeBayon (Contact Person) (Firm/Company)	gs LLC		TALL AND TO
415 E. Be	(Address)	Ave		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
evondebay	L 3212 ty, State and Zip Code) Con @ AMQI used for future annual rep	1.com		• •
For further information	·			
Elijah Von [ (Name of Contact	DeBayon Person)	at ( <u>386)</u> <u>30</u> (Area Code) (Days	ime Telephone Number)	
Enclosed is a check for dollars and drawn on a	_	•	ed by this office must be	payable in US
(\$25 for Conversion	□\$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 ADDRESS: New Filing Section Division of Corporatio Clifton Building		MAILING A New Filing Se Division of C P. O. Box 632	ection orporations	

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 <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:  Down Easter Hemp Farm Inc piscoco63671	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a <u>COYDOYATION</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or incorporated under the laws of <u>FLOYICO</u> (Enter state, or if a non-U.S. entity, the name of the country)	
on July 23, 2018 (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	
Down Easter Hemp Farms LLC (Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: UU 31, 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 7 day of 08	2018			
Signature of Authorized Representative of Limi				
Signature of Authorized Representative: Printed Name: Elijah Von DeBarron	Title: CEO			
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s)			
Signature:	ana. O			
$\mathcal{L}_{\mathcal{L}}$	) Title: P			
Signature: Name: Shart Profit	Title: VP			
Signature: Nath Off F Printed Name: Nicent Group LLC	Tiol. Ca M			
Signature: Printed Name:	Title:			
Signature: Printed Name:	Title			
Signature:Printed Name:	Title:			
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, 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 Liability Signatures of ALL General Partners.	ty Limited Partnership:	7.		
All others: Signature of an authorized person.		SEORE I	10 AUG	
Fees:		The Control	ີ - ຈ	. <b>;</b>
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	सं	PH 5: 57	: "

## ARTICLES OFORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	

(Must contain the words "Limited Liability Company, "L.L.C.," or "LI.C.")

### **ARTICLE II - Address:**

ARTICLE I - Name:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

Princi	pal Office	Address
СH	pai Omçe	Auure

330 Niatross St. 415 E. Beresford the Astor, FL 32102 Deland, FL 32724

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Name

HIS E Beres Ford Ave

Florida street address (P.O. Box <u>NOT</u> acceptable)

1d FL 53 13 City Zin

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> "AMBR" = Authorized Member	Name and Address:		
"MGR" = ManagerAMBR	Flyah Von DeBaron 915 E. Beresford Ave De Land, FL 32724		
<del></del>			
	18 AUG SECNE TALLAR		
	٠ ك ئز:		
(Use attachment if necessary)	<u></u>		
ARTICLE V: Other provisions, if any.			
REQUIRED SIGNATURE:			
This document is executed in accordance wit	authorized representative of a member h section 605.0203 (1) (b), Florida Statutes. I am aware that it to the Department of State constitutes a third degree felony		
ELijah Von Dest Typed	d or printed name of signee		
\$125.00 Filing Fee for Articles of C \$ 30.00 Certified Copy (Optional)	Filing Fees  Organization and Designation of Registered Agent S 5.00 Certificate of Status (Optional)		

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

ARTICLE IV-

Company: