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Please return all correspondence concerning this matter to:

For further information concerning this matter, please call:

Terry Janoski at (B13) 735-5436

(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)

S150.00 Filing Fees □\$155.00 Filing Fees □\$180.00 Filing Fees □\$185.00 Filing Fees, (\$25 for Conversion and Certificate of Certified Copy, and and Certified Copy & \$125 for Articles Status Certificate of Status of Organization)

STREET ADDRESS:

New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

MAILING ADDRESS: New Filing Section

Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country)
on Oalbalaoll (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Craphic Athletics, LLC (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 10 10 12018. (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.
THE AUG IT AN SECRETARY OF SHALL AHASSEE, FI

Signed this 8 day of 13 20 18.					
Signature of Authorized Representative of Limited Liability Company:					
Signature of Authorized Representative: Printed Name: Terry Tanocki Title: Manager					
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]					
Signature: Printed Name: Terry Janoski Title: President					
Signature: Title:					
Signature: Title:					
Signature: Title:					
Signature: Title:					
Signature: Title:					
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.					
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.					
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of <u>ALL</u> General Partners.					
All others: Signature of an authorized person.					
Fees:					

\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Articles of Conversion:

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: 8 AUG 17 AMII: 06 LCRSIARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Graphic Athletic (Must contain the words "Limited Liability	S, LLC Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
12468 Jacqueline Acad Brooksville, FL 34613	Brooker Brooksville, FL 34613
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ed Agent. You must designate an individual or another
The name and the Florida street address of the re-	gistered agent are:
Terry Janos	ik i
Name	
12468 Jacquelin Florida street address (P.O.	Road Box NOT acceptable)
Brooksville City	FL 34617
City	Zip
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and stered agent as provided for in Chapter 605, F.S
	A co
Registered Agent's Signa (CONTINU	ture (REQUIRED)
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The name and address of each person authorized to manage and control the Limited Liability Company:

Title: "AMBR" = Authorized Member "MGR" = Manager 6 6 2	Name and Address: Terry Janoski 1246 B Jacqueline Road Brooksville, FL 34613	
	18 AUG 17 AM II: O	FILED
(Use attachment if necessary)		
RTICLE V: Other provisions, if any.		
This document is executed in accordance vany false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony	
Terry Janos	iki.	

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)