1180002041448

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City)	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
. (Bus	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
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Office Use Only

COVER LETTER

SUBJECT: AOCINV	ESTMENT, LLC							
		of Re	sulting Florida	Limite	ed Company)	•		
					and fees are submitted to			Other
Please return all corr	espondence concernin	g thi	s matter to:					
Cheyenne Moseley								
	(Contact Person)							
LegalZoom.com, Inc.								
	(Firm/Company)							
101 N Brand Blvd 11th	ı Fl							
-	(Address)							
Glendale, CA 91203								
((City. State and Zip Code)							
ken19611@aol.com								
E-mail Address: (to b	e used for future annual re	port r	notifications)					
For further information	on concerning this ma	tter.	please call;					
Cheyenne Moseley		at	(800	773-	0888 ×9724			
(Name of Conta	et Person)		`——	(Day	time Telephone Number)			
Enclosed is a check f	or the following amou	int:						
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status		\$180.00 Filing I I Certified Copy		D\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
STREET ADDRESS	S:		MAILI	NG A	ADDRESS:			
Registration Section			Registra			Ţ		
Division of Corporati	ons				orporations	2000 11000 10000 1	1	
Clifton Building 2661 Executive Center	or Circle		P. O. Bo Tallahas		27 FL 32314		B AU	
- con three contract contract	or chere		rantanas) to 2/42/17		G)	•

INHS11 (01/14)

Tallahassee, FL 32301

TO: Registration Section Division of Corporations

Certificate of Conversion For "Other Business Entity" Into Florida Limited Liability Company

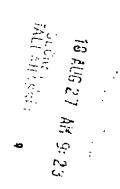
This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida

Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: AOCINVESTMENT, INC. 01400005391L (Enter Name of Other Business Entity) Corporation 2. The "Other Business Entity" is a (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.) First organized, formed or incorporated under the laws of ____ (Enter state, or if a non-U.S. entity, the name of the country) on (date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: AOCINVESTMENT, 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 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.)

Page 1 of 2

5. The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.



Signed this 17 day of august	20 <i>1 &</i> .	
Signature of Authorized Representative of Limi	ited Liability Company:	
Signature of Authorized Representative: Printed Name: Kenneth Kuczynski	Title: Manager	_
Signature(s) on behalf of Other Business Entity:	See below for required signature(s).	
Signature: Printed Name: Kenneth Kuczynski	Tisto. President	_
Printed Name: Neither Ruczyński	Title: Fresident	
Signature:Printed Name:	***	
Printed Name:	Title:	_
Signature:		_
Printed Name:	Title:	-
Signature:Printed Name:		_
Printed Name:	Title:	-
Signature:		_
Signature:Printed Name:	Title:	_
Signature:		_
Signature:Printed Name:	Title:	_
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.		
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:	10 131.1
All others: Signature of an authorized person.		18 AUG 27 AH 9: 23
Fees:		<u>₹</u>
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	e io

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must and with the words "I	NVESTMENT, LLC
(Mast end with the words 1.	imited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street addres	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
630 NE 56 Court	630 NE 56 Court
Oakland Park, FL 33334	Oakland Park, FL 33334
United States Corp	oration Agents, Inc. Name
13302 Winding Oa	k Court, Suite A
Florida street add	k Court, Suite A dress (P.O. Box NOT acceptable)
	k Court, Suite A dress (P.O. Box <u>NOT</u> acceptable) FL 33612

(CONTINUED)

Registered Agent's Signature (REQUIRED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
MGR = Wanager	Kenneth Kuczynski	
- Mart	660 NE 57th St	.
	Oakland Park, FL 33334	
MGR	Stephen DeLong	
	660 NE 57th St	<u> </u>
	Oakland Park, FL 33334	
		27
MGR	Sean McGarvey	*.
	16727 Ventry Way	7.
	San Lorenzo, CA 94580	<u> </u>
		" "
AMBR	Kenneth Kuczynski	نب)
	660 NE 57th St	
	Oakland Park, FL 33334	
(Use attachment if necessary) LE V: Effective date, if other tha fective date is listed, the date n days after the date of filing.)	in the date of filing:	(OPTIO
LE V: Effective date, if other that fective date is listed, the date n	in the date of filing: nust be specific and cannot be more t	(OPTIO:
LE V: Effective date, if other that fective date is listed, the date in days after the date of filing.)	in the date of filing:nust be specific and cannot be more t	(OPTIO
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LE V: Effective date, if other that fective date is listed, the date in days after the date of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a ment of accordance with section 605.02 estitutes an affirmation under the	mber or an authorized representative of penalties of perjury that the facts states	e of a member. on of this document of the docu
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LE V: Effective date, if other that fective date is listed, the date in days after the date of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men accordance with section 605.02 istitutes an affirmation under the in aware that any false information.	mber or an authorized representative 03 (1) (b). Florida Statutes, the executing penalties of perjury that the facts state on submitted in a document to the Department of the	e of a member. on of this document of the docu

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

ARTICLE IV-

Company:

of Registered Agent
S 30.00 Certified Copy (Optional)
S 5.00 Certificate of Status (Optional)