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(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:				

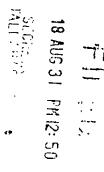
Office Use Only

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COVER LETTER

TO:	New Filing So Division of C					
SUBJ	IECT: Diaper G	oat, LLC				
500,		(Name of Res	sulting Florida Limi	ted Con	npany)	_
					d fees are submitted to coordance with s. 605.	
Please	e return all corre	espondence concernin	g this matter to:			
Justin	Bellamy					
	•	(Contact Person)		-		
Diape	r Goat, LLC					
-		(Firm/Company)		-		255
2525	Summerglen Driv	⁄e				書
		(Address)		-		18 AUG 31 F
Orland	do, FL 32818					18 NUS 31 PH 12: 50
	((Tity, State and Zip Code)		-		17:
diape	rgoatj@gmail.con	n				50
F1	nail Address: (to b	e used for future annual re	port notifications)	-		
For fu	irther information	on concerning this ma	tter, please call:			
Justin	Bellamy		_at (\416-6	6938	
	(Name of Conta	et Person)	(Area Code	_/	time Telephone Number)	
		or the following amou a bank located in the		rocess	sed by this office must	be payable in US
(\$25 fc & \$12:	50,00 Filing Fees or Conversion 5 for Articles anization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
New Divis Clifte 2661	EET ADDRESS Filing Section ion of Corporation Building Executive Cent hassee, FL 323	ions er Circle	New F Divisio P. O. E	iling S on of C Box 631	Corporations	

Articles of Conversion For "Other Business Entity" 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.

Diaper Goat, Inc.
(Enter Name of Other Business Entity)
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)
November 15, 2017
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Diaper Goat, LLC
(Enter Name of Florida Limited Liability Company)
Date of Filing 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 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 22r	nd day of August	20 18 .		
	Authorized Representative of Limi			
Signature of A Printed Name:	uthorized Representative:	Title: Manager		
Signature(s) of		See below for required signature(s)		
Printed Namer	Justin Bellamy	Title: President		
Printed Name:_		Title:		
Signature: Printed Name:_		Title:		
Signature: Printed Name:_		Title:		
Signature: Printed Name:_		Title:		
Signature: Printed Name:_		Title:		
	poration: nairman, Vice Chairman, Director, or Officers have not been selected, an Inc			
	<u>eral Partnership or Limited Liabili</u> e General Partner.	tv Partnership:		
	<u>ited Partnership or Limited Liabili</u> LL General Partners.	ty Limited Partnership:		
All others: Signature of an	authorized person.		SEC:0 TALLA	18 AUG
Fees:			200	363
Fees fo Certifie	s of Conversion: r Florida Articles of Organization: ed Copy; cate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	•	PH 12: 51

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	is:
Diaper Goat, LLC	
(Must contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1635 E. Highway 50	2525 Summerglen Drive
Suite 204	Orlando, FL 32818
Clermont, FL 34711	
	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:
hartin Dallana	
Justin Bellamy	me
144	THE CONTRACTOR OF THE CONTRACT
2525 Summerglen Drive	
Florida street address (P	.O. Box NOT acceptable)
Orlando	FL 32818
City	Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as	d to accept service of process for the above stated limited in this certificate. I hereby accept the appointment as eacity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and registered agent as provided for in Chapter 605, F.S
(CONT	INUED) 2 5 5 7 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2

ARTICLE IV-

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

<u>Title:</u>	Name and Address:			
"AMBR" = Authorized Member				
"MGR" = Manager				
MGR	Justin Bellamy			
	2525 Summerglen Drive		-	
	Orlando, FL 32818		_	
AMBR	Danielle Archer			
 	6440 Berry Groves Road			
	Clermont, FL 34714		_	
			_	
		 		
	-		_	
			_	
			_	
		<u> </u>		
(Use attachment if necessary)		15.	B NUG	••••
		표면 194	(T)	100
		200 A	$\frac{\omega}{2}$	
FICLE V: Other provisions, if any.		11	-T1	
other provisions.			7	
			<u> </u>	
	 	<u>u</u>	ĊJ.	_

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Justin Bellamy

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)