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COVER LETTER

TO: New Filing Division of	Section Corporations				
	CLASS AUTO SALES IN	iC			
30 20 201		esulting Florida Lir	nited Co	ompany)	
	les of Conversion. Art	icles of Organiza Liability Compa	ation, a ny" in	nd fees are submitted to accordance with s. 605.	o convert an "Other 1045, F.S.
Vijay Ramlogan					
HIGH CLASS AUTO	(Contact Person) SALES INC		-		
1919 NW 21ST STRE	(Firm/Company)		-		
	(Address)				حد
POMPANO BEACH,	FL 33069				500
vsautobody@gmail.co	(City, State and Zip Code) om		_ ,		18 SEP 19 17 1:27
E-mail Address: (to	be used for future annual r	port notifications)	_		
	ion concerning this ma				
		at (954	,461 -3	3186	e ?
(Name of Cont	act Person)	(Area Code) (Day	3186 rtime Telephone Number)	-
Enclosed is a check a dollars and drawn or	for the following amou a bank located in the	int: (All checks i		ed by this office must h	oe payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	D\$180.90 Filing and Certified Cop	Fees by	S185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS New Filing Section Division of Corporati Clifton Building		New Fi	ling Se	DDRESS: ection opporations	

P. O. Box 6327

Tallahassee, FL 32314

INHS11 (7/17)

Clifton Building

2661 Executive Center Circle Taliahassee, 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 a 605 1045. Florida Limited Liability Company in accordance with a 605 1045.

Statutes.	rith s.605.1	045, F	lorida
1. The name of the "Other Business Entity" immediately prior to the filing of the Article HIGH CLASS AUTO SALES INC	es of Conv	ersion	is:
(Enter Name of Other Business Entity)	٠,		
2. The "Other Business Entity" is aCORPORATION			
(Enter entity type. Example: corporation, limited partnership, general partnership, commo	on law or bus	iness tru	st, etc.)
First organized, formed or incorporated under the laws ofFLORIDA			
(Enter state, or if a non-U.S. entity, the	name of the	country)
(date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability Company as set forth in the attached Arti- HIGH CLASS AUTO SALES LLC	cles of Org	ganizar	tion:
(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 90 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 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.			
 The "Converted or Other Business Entity" has agreed to pay any members having appraisa which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. 	al rights the	amour	ıt to
	SLERVIS	18 SEP 19	
			٠.
		77.	

Signed this 6	day of SEPTEMBER	20 <u>18</u>			
Signature of Aut	thorized Representative of Li	mited Liability Company:			
Printed Name: Vija	norized Representative:	Title: MGR			
Signature(s) on b	ehalf of Other Business Entity:	[See below for required signature(s)]			
Signature: (2) ///	and les L				
E CHREST MARINE, AND	Y FORGUNGSHOOT	Title: SA			
ar. A L	/ st.				
Printed Name: VIVE	SH RAMLOGAN	Title: President			
Signature:		Title:			
raned Ivanie.	····	Title:			
Signature:		Tal			
Printed Name:		Title:			
Printed Name:		Title:			
Printed Name:		Title:			
		Title.			
If Florida Corpora	ation: nan, Vice Chairman, Director, or	0.00			
If Directors or Office	cers have not been selected, an In	Other.			
Signature of one Ge	Partnership or Limited Liabil	ity Partnership:			
Signature of one de	inotar raruicr.				
If Florida Limited Signatures of ALL.	Partnership or Limited Liabili General Partners.	tv Limited Partnership:			
All others: Signature of an auth	norized person.				
Fees:			-1		
rces.				6 0	٠
Articles of (\$25.00	r. 1	SEP	ž 1
Fees for Flo	orida Articles of Organization:	\$125.00	:·:	ھَ	
Certified Co Certificate o		\$30.00 (Optional)			τ
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company	is:	
HIGH CLASS	S AUTO SALES LLC	
(Must contain the words "Limited Liah ARTICLE II - Address: The mailing address and street address of the		iability Company is:
Principal Office Address:	Mailing Address:	
1919 NW 21ST STREET UNIT C	1919 NW 21ST STREET UNIT C	
POMPANO BEACH, FL 33069	POMPANO BEACH, FL 33069	
ARTICLE III - Registered Agent, Registers The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.) The name and the Florida street address of the DIROCCO & COMPANY, C.	erstered Agent. You must designate an indivi	s Signature: dual or another
Nan	ne	
7800 W OAKLAND PARK BI	LVD C306	A = 60
	O. Box NOT acceptable)	SEP I
SUNRISE	FL 33351	ີ້
City	Zip	
Having been named as registered agent and liability company at the place designated to registered agent and agree to act in this capa statutes relating to the proper and complete accept the obligations of my position as referenced to the proper and complete accept the obligations of my position as referenced to the Registered Agent's Signature and the proper and complete accept the obligations of my position as referenced to the proper and complete accept the obligations of my position as referenced to the proper and complete accept the obligations of my position as referenced to the proper and complete accept the obligations of my position as referenced to the proper and complete accept the obligations of my position as referenced to the proper and complete accept the obligations of my position as referenced to the proper and complete accept the obligations of my position as referenced to the proper and complete accept the obligations of my position as referenced to the proper and complete accept the obligations of my position as referenced to the proper and complete accept the obligations of my position as referenced to the proper accept the pr	in this certificate, I hereby accept to city. I further agree to comply with performance of my duties, and I also agent as provided for in the performance of the provided for in the performance of the pe	the appointment as a h the provisions of all

(CONTINUED)

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	
MGK	VIJESH RAMLOGAN
	1900 NW 35th Ave
	Coconut Creek, FL 33066
MGR	
	Vijay Ramlogan
	8712 NW 75th court
	Tamarac, FL 33321
MGR	ANGANIE GARDNER
	8712 NW 75th court
	Tamarac, FL 33327
	14114149 1 5 00027
(Use attachment if necessary)	
•	
REQUIRED SIGNATURE:	
(a) Minutant	
Signature of a member or	an authorized representative of a member
Signature of a member or This document is executed in accordance	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
Signature of a member or a This document is executed in accordance any false information submitted in a document.	ment to the Department of State constitutes a third degree felony
Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155. F.S.	with section 603,0203 (1) (b), Florida Statutes, I am aware that ment to the Department of State constitutes a third degree felony Vijay Ramlogan
Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Typ	Vijay Ramlogan ped or printed name of signce Filing Fees
Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155. F.S. Typ \$125.00 Filling Fee for Articles of	Vijay Ramlogan ped or printed name of signee Filing Fees f Organization and Designation of Registered Face of Filing Actions and Designation of Registered Face of
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