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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: | | | |
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Office Use Only

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COVER LETTER

| SUBJECT: Enl | ighten ment (Name of Res | Bioconsult, | LLC | |
|--|---|---|--|-----------------|
| | (Name of Res | ulting Florida Limited Con | ipany) | ' |
| | | | d fees are submitted to coccordance with s. 605.10 | |
| Please return all corre | espondence concerning | g this matter to: | | |
| Christian | Pezolla (Contact Person) ezolla Esq. (Firm/Company) | | | |
| | (Contact Person) | | | |
| Christian Pl | ezolla Esq. | | | |
| | (Firm/Company) | | | |
| 1405 Becc | L St ste 3/4 (Address) | 0 | | |
| | | | | |
| Daytora Be | city. State and Zip Code) Cod. Com be used for future annual re | <i>4</i> | | |
| ((| City, State and Zip Code) | | | |
| Cpczolk @ | 2 colicom | | | |
| E-mail Address; (to b | e used for future annual rep | port notifications) | | |
| For further informati | on concerning this mat | tter, please call; | | |
| Christian | PCZ=//k | at (386) 58 | 39 2508 | - |
| (Name of Conta | ict Person) | (Area Code) (Day | rtime Telephone Number) | |
| | or the following amou a bank located in the | | sed by this office must b | e payable in US |
| \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) | □\$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: | | MAILING A | ADDRESS: | |
| New Filing Section | | New Filing Section | | ` . '. |
| Division of Corporations | | Division of Corporations | | - , 70 |
| Clifton Building | | P. O. Box 6327 | | ့ ာ |

Tallahassee, FL 32314

INHS11 (7/17)

2661 Executive Center Circle

Tallahassee, FL 32301

TO: New Filing Section
Division of Corporations

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 s.605.1045. Florida Statutes.

| Statutes. |
|--|
| 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Fright enmst Biscons-1+ LCC (Enter Name of Other Business Entity) |
| (Enter Name of Other Business Entry) |
| 2. The "Other Business Entity" is a Canhe cfi cet Registered Limited Liebilit/ Company. (Enter entity type. Example: corporation. limited partnership. general partnership. common law or business trust, etc.) |
| First organized, formed or incorporated under the laws of Connecticity, state of (Enter state, or if a non-U.S. entity, the name of the country) |
| on 20 Senvery 2016 (date of organization, formation or incorporation) |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: |
| Enlightenment Bioconsult, LCC (Enter Name of Florida Limited Liability Company) |
| 4. If not effective on the date of filing, enter the effective date: 15 october 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. |
| 18 0CT - 2 F |

| Signed this 27 | _ day of September | 20_18 |
|---|---|--|
| Signature of Author | rized Representative of | Limited Liability Company: |
| Signature of Authoriz Printed Name: <u>Christia</u> | zed Representative: n Pezalla Esq. | Title: Company Attorney |
| Signature(s) on beha | If of Other Business End | (Kv: [See below for required signature(s)] |
| Printed Name: Edmund | Pezalia | Title: Owner/Manager |
| Signature: | 27 n Pezaila Esq. | Sep 20/8 Title: Company Attorney |
| Signature:Printed Name: | | Title: |
| Signature: | | Title: |
| Signature:Printed Name: | | Title: |
| Signature: Printed Name: | | Title: |
| If Directors or Officers <u>If Florida General P</u> a | , Vice Chairman, Director s have not been selected, a ertnership or Limited Lie | n Incorporator must sign. |
| Signature of one Gene | ral Partner. <u>rtnership or Limited Lis</u> | ability Limited Partnership: |
| All others: Signature of an authori | zed person. | |
| Fees: | | |

Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00 \$30.00 (Optional) \$5.00 (Optional) Certified Copy: Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| The name of the Limited Liability Company is: |
|--|
| Enlightenment Bioconsult; LLG (Must contain the words "Limited Liability 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: |
| 140 S. Reach St Ste 310 Daytona Reach, FL 32114 Daytona Beach, FL 32114 |
| 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: |
| Christian Peralle Esq. |
| |
| 140 s. Beach 9st |
| Florida street address (P.O. Box NOT acceptable) |
| Daytone Beach FL 32/14 City Zip |
| City Zip ' |
| 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" = Manager M (- R | Edmind J Pozolla 2200 N Atlantic Ave. Apt 401 Daytona Beach, FL 32118 |
| _ N/A | |
| N_/A | 70 50 |
| _ <i>N /A</i> | |
| (Use attachment if necessary) | * 0 |
| ARTICLE V: Other provisions, if any. | N/A |
| <u>REQUIRED</u> SIGNATURE: | |
| This document is executed in accordance | r an authorized representative of a member re with section 605.0203 (1) (b). Florida Statutes, I am aware that ument to the Department of State constitutes a third degree felony |
| Christian F. Pezalla | FL B-1 member 0/25277 Syped or printed name of signee |
| ı | 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)

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

ARTICLE IV-