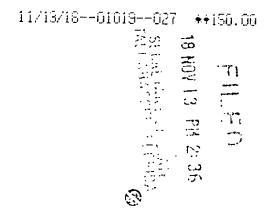
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(Requestor's Nan	ne)
(Address)	
(Address)	
(City/State/Zip/Pr	none #)
PICK-UP WAIT	MAIL.
(Business Entity	Name)
(Document Numb	ber)
Certified Copies Certific	ates of Status
Special Instructions to Filing Officer:	

Office Use Only



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NOV 16 7018

COVER LETTER

TO: New Filing Section Division of Corporations					
SUBJECT: Triple One Marketine & Managment (Name of Resulting Florida Exhited Company)					
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to co Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.104					
Please return all correspondence concerning this matter to:					
Kendaj Michel (Contact Person)					
Triple One Marketing & Managment Inc (Firm/Company)					
985 NW 116+					
MIGHLIFE 33168 (City, State and Zip Code)					
E-mail Address: (to be used for future annual report notifications)					
For further information concerning this matter, please call:					
Kendal Michel at (305) 240 - 7357 (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 dollars and drawn on a bank located in the United States)	payable in US				
\$150.00 Filing Fees (\$25 for Conversion & Status Status					
STREET ADDRESS: New Filing Section Division of Corporations MAILING ADDRESS: New Filing Section Division of Corporations					

P. O. Box 6327

Tallahassee, FL 32314

INHS11 (7/17)

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

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 Dysings Entity" immediately prior to the filing of the Articles of Conversion is:
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
Triple One Marketing & Management Inc (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>Corporation</u> 712 - 93060
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Floridg
First organized, formed or incorporated under the laws of
, and the second
on 11/02/2012
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Triple One Marketine & Mangament 110
Triple One Marketing & Hanagment LLC (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: (The effective date: Connect be prior to date of receipt on filed date nor more than 20 colordor days often.
(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.
<i>₩</i> .

Signed this <u>O</u> day of <u>No Vembe</u>	<u>120/3</u>	
Signature of Authorized Representative of Limit	ted Liability Company:	
Signature of Authorized Representative: Printed Name: Kendal Mickel		
Signature(s) on behalf of Other Business Entity: [See below for required signate	ure(s)]
Signature: A P		
Printed Name: Kendal Michel	Title: CEO	
Signature: Olyantur Jung	<u>L</u>	<u> </u>
Printed Name: Al Clandro TIZOT	Title: <u>C.FO</u>	
Signature: Cum froffing		
Printed Name: Evans Raphae	Title: President	
Signature: Wustoped Code? Printed Name: Christopher Caset	Tislan 1 (Con Dome Score	to unt
'	·	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers or Officers have not been selected, an Inc. If Florida General Partnership or Limited Liability Signature of one General Partner.	corporator must sign.	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	FILED 18 NOV 13 PH 2: 36
		OA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Triple One Mar (Must contain the words "Limited Liability	Keting & Managment LLC Company, "UL.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:			
985 N.W 1115t Mam, F1 33168	985 N.W 1/15+ MIami, F1 33/68			
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 re	gistered agent are:			
Evans 1	Registered agent are:			
Name				
989 Nu) ///st			

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)

ARTICLE IV	CLE IV.	l	-1	. 1	К	N١	1
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The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager Kendal Michel CEO	985 N.W 1115t Migmi, Fl 33168
Alejandro Tizol CFO	555 SW 195t Apt 3 Mami, Fl 33130
Lamar Exilus - Pres	650 N.W 122 ST Apt 209 Miami, Fl 33168
Christopher Cadet vice	985 N.W 11155 Miami, Fl 33/68
(Use attachment if necessary)	WOV TO
ARTICLE V: Other provisions, if any.	P. T.
REQUIRED SIGNATURE:	
This document is executed in accordance with	section 605.0203 (1) (b). Florida Statutes. I am aware that to the Department of State constitutes a third degree felony
Kenda	or printed name of signee
Typed	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)