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(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Ĉi	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

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COVER LETTER

TO: New Filing S Division of C				
SUBJECT: Kulik Fa	mily Restaurants, LLC			
5010CCT.	(Name of Res	alting Florida Lin	ited Con	npany)
				d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to		
John Carter				
	(Contact Person)			
Carter Reymann Law, P	.A.			
	(Firm/Company)		_	
9500 Koger Blvd, Suite	112			
	(Address)			
St. Petersburg, Florida 3	3702			
	City, State and Zip Code)		_	
kulikmd7@gmail.com				
E-mail Address: (to l	ne used for future annual re	port notifications)	_	
For further informati	ion concerning this ma	tter, please call	:	
John Carter		_at (\ ⁴⁵⁶⁻⁸	8970
(Name of Cont	act Person)	(Area Cod	e) (Day	vtime Telephone Number)
	for the following amou a bank located in the		proces	sed by this office must be payable in US
S150,00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180,00 Filir and Certified Co		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
STREET ADDRES	SS:			ADDRESS:
New Filing Section			Filing S	
Division of Corporat	uons	IJivis	ion of C	Corporations

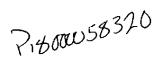
P. O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301



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 Business Entity" immediately prior to the filing of the Articles of Conversion is: Kulik Family Restaurants, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation (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)
7/2/2018
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Kulik Family Restaurants, LLC
(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 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 day of November	
Signature of Authorized Representative of Limi	ted Liability Company:
DocuSigned by	:
Signature of Authorized Representative: Maksym &	ulik
Printed Name: Maksym Kulik 72:033C17C2B	4F7Title: Manager
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Maksym kulik Printed Name: Newson Kytik	
Signature: Maksym kulik	
Printed Name: Naksen-Kulik	Title: President
Signature:Printed Name:	
Printed Name:	Title:
Signature:Printed Name:	art.
Printed Name:	_ little:
C:	
Signature: Printed Name:	Tieles
Printed Name:	_ riuc
Cianatura	
Signature: Printed Name:	Title
Timed Name.	
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabilit	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Comm	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00 \$20.00 (Ontional)
Certified Copy:	\$30.00 (Optional) \$5.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Kulik Family Restaurar	nts. LLC		
		bility Company, "L.L.C.," or "LL.C.,")	
ARTICLE II - Ade	d manage		
		e principal office of the Limited Liability Compa	any is:
_			•
Principal Office Ac	ddress:	Mailing Address:	
6601 S. Westshore Blvd	d	6601 S. Westshore Blvd	
#1307		#1307	
Tampa, FL 33616		Tampa, FL 33616	
		he registered agent are:	
	Maksym Kulik	ame	
	Maksym Kulik	ame	
	Maksym Kulik N 6601 S. Westshore Blvd, #1	ame	
	Maksym Kulik N 6601 S. Westshore Blvd, #1	ame 807 P.O. Box <u>NOT</u> acceptable)	
	Maksym Kulik N 6601 S. Westshore Blvd, #1 Florida street address (ame 807	

(CONTINUED)

ARTICLE IV-

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

"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Maksym Kulik
	6601 S. Westshore Blvd, #1307
	Tampa, FL 33616
AMBR	Maksym Kulik
	6601 S. Westshore Blvd, #1307
	Tampa, FL 33616
MGR	Dmytro Kulik
	6601 S. Westshore Blvd, #1307
	Tampa, FL 33616
	
(Use attachment if necessary)	
LE V: Other provisions, if any,	
CLE V: Other provisions, if any.	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE: Maksym kulik	
REQUIRED SIGNATURE: Docusioned by: Maksym kulik Signature of a member or	an authorized representative of a member
REQUIRED SIGNATURE: Maksym Eulik	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware unent to the Department of State constitutes a third degree fe

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)