# L18000038412H

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



200321080352

11/28/18--01019--004 \*\*150.00

18 DEC 18 PM 1:40
SECRETARY OF STATE
FALL AHASSEE, FLORIDA

TEC. 9 JA

### **COVER LETTER**

STREET ADDRESS	S:	MAILING A	DDRESS:	
\$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	
	or the following amour a bank located in the U		ed by this office must be p	ayable in US
(Name of Contact		at (172) 3c (Area Code) (Day	time Telephone Number)	
	-		2 0007	
	on concerning this matt			
Femail Address (to be	used for fundre annual rep	ort notifications)		
(C	City, State and Zip Code)			
Port Sain	+ Lucie FI	<u> 34953</u>		
	(Address)	<del>- 1</del>		
2284 Su	) Monterry	ev Lane		
INC Crat	Hed Chew (Firm/Company)	1.LL		
-1100 (100)	(Contact Person)			
And	G. Chen			
Please return all corre	spondence concerning	this matter to:		
•			cordance with 3, 003,1043	, 1 .5.
			d fees are submitted to con- cordance with s. 605.1045	
	(Name of Resu	Ilting Florida Limited Com	pany)	
SUBJECT: NC	- Crafted	Chen, U	L update	oddves
Division of Co		^		ald rac
IU: New Filing Se	ction			

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

#### **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:

The Crafted Chen, UC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a The Crafted Chen, Luc (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of <u>Calorgia</u> (Enter state, or if a non-U.S. entity, the name of the country)
on 05 03 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:  The Crafted Chen, 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 12 day of NOVUM ber	2-20 18		<del></del>
Signature of Authorized Representative of Limit	ted Liability Company:		_
Signature of Authorized Representative:  Printed Name: AYIL (2) Chem	A. Chin		
Printed Name: AMUG. Chem	Title: OWNCR	_	
	Cas below for required signature(s)		
Signature(s) on behalf of Other Business Entity:	See perow for required signature(s)	•	
Signature: Arici G. Chen			
Printed Name: Aric G. Coch	Title: OWNER	<del></del>	
Signature:		_	
Printed Name:	_ Title:	_	
Signature:		<del></del>	
Signature:Printed Name:	Title:	_	
Signature:		<del></del>	
Printed Name:			
Signature:		_	
Printed Name:		<del>_</del>	
Ci-matura:			
Signature: Printed Name:		<del></del>	
		•	•
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer.		
If Directors or Officers have not been selected, an Inc	corporator must sign.		
If Florida General Partnership or Limited Liabili	ty Partnership:		
Signature of one General Partner.			
Terry (1. I in its J Danta auchin on Limited Linbili	ty Limited Partnership	3	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	W Dimitted 1 at the 1 surp.		
<u>-</u>			
All others: Signature of an authorized person.			
		57	
<u>Fees:</u>		18 SEL	
Articles of Conversion:	\$25.00	部局	
Fees for Florida Articles of Organization:	\$125.00	SS C	7
Certified Copy:	\$30.00 (Optional) \$5.00 (Optional)	35 - 1	***
Certificate of Status:	55.00 (Optional)		$\boldsymbol{\cap}$

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
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:
2084 SW Monterrey Lane 2084 SW Monterrey Lane Port Saint Lucie, FL Port Saint Lucie, FL 34953
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:
Ariel G. Chen
Name Som to the second
2284 SW Montervey Lane 175 - m
riorida street audress (F.O. Box MOT acceptable)
Port-Saintlucie FL 34953
City Zip S
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

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Anel G. Chen
AMBR	1294 SW Montevier Lanc
	Port Saint Lucie, FL, 34953
	2.10.000
en e	The second of the second of the second
	<del></del>
	<del></del>
(Use attachment if necessary)	SE
	SECRE TALL AH
(Use attachment if necessary)  LE V: Other provisions, if any.	SECRETARS
	SECRETANT TALL AHASSEE
	SECRETARY OF STALL AHASSEE. FI
LE V: Other provisions, if any.	SECRETARY OF STAN
	SECRETARY OF STATE FLORIDA
LE V: Other provisions, if any.  REQUIRED SIGNATURE:	SECRETARY OF STATE TALL AHASSEE, FLORIDA  A  A  A  A  A  A  A  A  A  A  A  A
REQUIRED SIGNATURE:  Signature of a member This document is executed in accordany false information submitted in a d	or an authorized representative of a member ance with section 605.0203 (1) (b), Florida Statutes. I am aware to document to the Department of State constitutes a third degree fellows.
REQUIRED SIGNATURE:  Signature of a member This document is executed in accordany false information submitted in a das provided for in s.817.155, F.S.	ance with section 605.0203 (1) (b). Florida Statutes, I am aware to document to the Department of State constitutes a third degree fel
REQUIRED SIGNATURE:  Signature of a member This document is executed in accordany false information submitted in a das provided for in s.817.155, F.S.	and with rection 605 0203 (1) (b) Florida Statutes, I am aware t

.