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(Reque	estor's Name)
(Addre	ss)
(Addre	ss)
(City/S	tate/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busin	ess Entity Name)
(Document Number)	
Certified Copies	Certificates of Status
Special Instructions to Fili	ng Officer:
L	

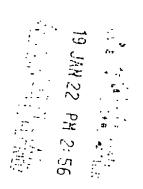
Office Use Only

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COVER LETTER

TO: New Filing Se			
Division of Co	•	Of Innasta ulting Florida Limited Con	ate Studios LLC
			d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	spondence concerning	g this matter to:	
Kivill O Innasta	(= = :::: : : : : : : : : : : : : : : :)5	
	treet Ocean		
Marathi	on, FL 330) <i>50</i>	
(C	ity, State and Zip Code)		
	Kov@Gmail		
E-mail Address: (to be	used for future annual rep	port notifications)	
For further information	n concerning this mat	tter, please call:	
Kirill Olev	nikor	,139 ,10	11-9187
(Name of Contac	t Person)	at (<u>239</u>) 20 (Area Code) (Day	rtime Telephone Number)
	or the following amou	nt: (All checks process	sed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	S180.00 Filing Fees and Certified Copy	\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS New Filing Section	:	MAILING A New Filing S	

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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
on 11.25.2014 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Innastate Studios
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: $9-16-19$. (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 16th day of January	20 19			
Signed this day or				
Signature of Authorized Representative of Limi	ted Liability Company:			
Exp.	11/ Orenitor			
Signature of Authorized Representative: Fire Printed Name: KIRILL OLEYNIKOV	Title: QU/NOV			
7 miled (vanie) 177 14 2 2 3 5 5 7 1 2 2 5 5				
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)			
Signature:				
Printed Name/Lichelle Lakounty	Title: OWNER			
Signature:Printed Name:	2001			
Printed Name:	I itle:	-		
Signature:				
Signature: Printed Name:	Title:	-		
Cimana				
Signature:Printed Name:	Title:	-		
		•		
Signature:Printed Name:				
Printed Name:	Infe:	-		
Signature:				
Signature: Printed Name:	_ Title:	-		
If Florida Componetions				
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 Signature of one General Partner.	ty Partnership:			
Signature of the General Father.				
If Florida Limited Partnership or Limited Liability	ty Limited Partnership:	_		
Signatures of ALL General Partners,			(C)	
All others:		<u>-</u>	-	
Signature of an authorized person.			いい	
r^		•	22	7
<u>Fees:</u>				i.
Articles of Conversion:	\$25.00		 မျာ	:_
Fees for Florida Articles of Organization:	\$125.00	. ~		
Certified Copy:	\$30.00 (Optional)			
Certificate of Status:	\$5.00 (Optional)			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Innastate Studios	
(Must contain the words "Limited Liabilit	y Company, "L.E.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
800 35th Street Ocean Marathon, FL 33050	800 35th Street Ocean Marathon, FL 33050
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	
The name and the Florida street address of the r	•
Kirill Oleyn	i Kov
Name	
800 35th Str	eet Ocean
Florida street address (P.O	. Box <u>NOT</u> acceptable)
Marathon	FI 33050
Marathon	Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p	o accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of al performance of my duties, and I am familiar with and distered agent as provided for in Chapter 605, F.S
1/1/1/ E	Henry :
Registered Agent's Sign	

(CONTINUED)

ARTICLE IV-

as proyided for in s.817.155, F.S.

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			
100 0			
MGR	Kirill Oleynikov		
MGR	Kirill Oleynikov 800 35th Street Ocean Marathon, FL 33050		
	•		
	Michelle La Bounty		
	Michelle La Bounty 300 35 th street Ocean maragnon, FL 33050		
	1.000		
			
	<u> </u>		
(Use attachment if necessary)	22		
	· · · · · · · · · · · · · · · · · · ·		
FICLE V: Other provisions, if any.	in the second se		
REQUIRED SIGNATURE:			
KIRM Oleypru			
	an authorized representative of a member		
This document is executed in accordance	with section 605.0203 (1) (b). Florida Statutes—am aware that ment to the Department of State constitutes a third degree felony		

Typed or printed name of signee

Filing Fees