L1900004)246

(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:

02/19/19--01035--022 **180.00



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February 13, 2019

300 Massachusetts Ave. Boston, MA 02115 Tel. 617-320-3861 www.janefreedmanlaw.com

Certified Mail Return Receipt Requested

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

RE: Articles of Conversion and Articles of Organization

Dear Sir/Madam:

Kindly file as promptly as practicable the enclosed Articles of Conversion and Articles of Organization to convert Stratus Global LLC from a Massachusetts business entity into a Florida Limited Liability Company. Please return all correspondence including a certified copy of the Articles as noted in the enclosed Cover Letter. We enclose a check in the amount of \$180.00 to cover the fees for the filing and return of the certified copy.

Kindly contact Jane E. Freedman, Esq. or Alicia Wyman, Esq., legal counsel to Stratus Global LLC, with any questions. As proof of filing, kindly date stamp the enclosed copy of this letter and return it in the self-addressed, stamped envelope provided.

Sincerely,

Jane E. Freedman

ec: Prattipati Laxminarain

Alicia M.V. Wyman, Esq.



February 13, 2019

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Sincerely,

Jane E. Freedman

cc: Prattipati Laxminarain

Alicia M.V. Wyman, Esq.

COVER LETTER

TO: New Filing So	ection			
Division of C	orporations			
SUBJECT: Stratus G	lobal LLC	_		
	(Name of Re	sulting Florida Limite	d Con	npany)
				d fees are submitted to convert an "Othe coordance with s. 605,1045, F.S.
Please return all corre	espondence concernir	ng this matter to:		
Jane E. Freedman				
	(Contact Person)			
Jane Freedman Law, LL	С			
	(Firm/Company)			
300 Massachusetts Aven	ue, 2nd Floor			
	(Address)			
Boston, MA 02115				
((City, State and Zip Code)			
jane@janefreedmanlaw.o	com			
E-mail Address: (to b	e used for future annual re	eport notifications)		
For further information	on concerning this ma	atter, please call:		
Alicia M.V. Wyman		at (617	834-7	612
(Name of Conta	ct Person)	(Area Code)	(Day	time Telephone Number)
dollars and drawn on	a bank located in the	United States)		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	180,00 Filing F and Certified Copy	ees	☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
STREET ADDRESS	S:	MAILI	NG A	ADDRESS:
New Filing Section		New Fil	ing S	ection
Division of Corporati	ions			orporations
Clifton Building		P. O. Bo	X 032	41

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

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.

(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, common	n law or business trust, etc.)
First organized, formed or incorporated under the laws of	name of the country)
October 12, 2017	,
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Artic	cles of Organization:
Stratus Global 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 the date this document is filed by the Florida Department of State.)	d calendar days after
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
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 apprais	al rights the amount to

Signed th	nis <u>6th</u>	day of February	20_19
Signatuı	re of Auth	orized Representative of L	Proited Liability Company:
Signatur	e of Author	rized Representative:	
Printed N	lame: Prattic	pati Laxminarain	Title: Member
i iiiicu i	taine. Tracel	AG 1/ACVIDITEDIU/	Title. Memoer
	11	\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	y: See below for required signature(s)
Signature) e:	Vu-	
Printed N	lame: Pratti	oati Laxminarain	Title: Member
Printed N	Jame [.]	 	Title:
, initod 1			1140.
Signature	e :		
Printed N	 lame:		Title:
Signature	e:		
Printed N	lame:		Title:
Signature	:		
Printed N	lame:	· 	Title:
Signature	.		
Printed N	Jame:		Title:
i illitod i			
If Florid	a Corpora	tion:	
		an, Vice Chairman, Director.	or Officer.
_		ers have not been selected, a	
		<u>Partnership or Limited Lia</u>	bility Partnership:
Signature	e of one Ge	neral Partner.	
16.53	T * *. 1		
II Florid	a Limited	Partnership or Limited Lia	bility Limited Partnership:
Signature	S OF ALL C	General Partners.	
All other	% :		
		orized person.	
- 5			
Fees:			
A	articles of (Conversion:	\$25.00
F	ees for Flo	rida Articles of Organizatio	
	Certified Co		\$30.00 (Optional)
	Certificate o		\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Com	pany is:	
Stratus Global LLC		
(Must contain the words "Limit	ed Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address	of the principal office of the Limite	ed Liability Company is:
Principal Office Address:	Mailing Address:	
808 Brickell Key Drive	808 Brickell Key Drive	
Apt. 3507	Apt. 3507	
Miami, Florida 33131	Miami, Florida 33131	
The name and the Florida street address Prattipati Laxminarain		
	Name	
808 Brickell Key Drive	, Apt. 3507	
Florida street addre	ess (P.O. Box <u>NOT</u> acceptable)	
Miami	FL 33131	
City	Zip	
registered agent and agree to act in the statutes relating to the proper and co accept the obligations of my position	mated in this certificate, I hereby ac is capacity. I further agree to comp	cept the appointment as ly with the provisions of all nd I am familiar with and
(C)	ONTINUED)	2016

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	Prattipati Laxminarain
	808 Brickell Key Drive, Apt. 3507
	Miami, Florida 33131
	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Prattipati Laxminarain

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)