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COVER LETTER -

TO:	New Filing So Division of C			
SUR.	IECT:	н	emp Boca, Inc.	
5050		(Name of Res	ulting Florida Limited Cor	npany)
The e Busin	nclosed Articles less Entity" into	s of Conversion, Articl a "Florida Limited Li	les of Organization, an ability Company" in a	nd fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Pleas	e return all corre	espondence concerning	g this matter to:	
	Nantav	wan Posang		
	-	(Contact Person)		
	Hemp	Boca, Inc.		
		(Firm/Company)		
	2827 I	Ielm Court, #104		
		(Address)		
	Lantar	ia, FL 33462		
	(0	City, State and Zip Code)	· · · · · · · · · · · · · · · · · · ·	
	jean@	hempboca.com		
E-1	nail Address: (to be	e used for future annual rep	port notifications)	
For fu	irther information	on concerning this mat	ter, please call:	
	Nantawan Po	osang	at (561) 33	30-5655
	(Name of Contact	ct Person)	(Area Code) (Day	rtime Telephone Number)
		or the following amou a bank located in the I		sed by this office must be payable in US
(\$25 fc & \$12:	50.00 Filing Fees or Conversion 5 for Articles anization)	□\$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
New I Divis: Clifto 2661	EET ADDRESS Filing Section ion of Corporati in Building Executive Center nassee, FL 3230	ons er Circle	MAILING A New Filing S Division of C P. O. Box 63 Tallahassee,	ection Corporations 27

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: Hemp Boca, Inc. 150 755	r I
(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,	
	eic.)
First organized, formed or incorporated under the laws of	
June 4th, 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	n:
Hemp Boca, LLC	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: February 25, 2019	
(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 which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	to

Signed	this	18th	_day of	February	20_19	- (
Signat	ure of	Authori	zed Repr	esentative of Limi	ted Liabili	ity Con	npany:	
Signatu Printed	are of A Name:	Authorize	ed Represe TAWHN	entative:	_ Title:	7_		2-18-19
Signati	ure(s) c	on behat	f of Other	Business Entity:	See below	for req	uired si	gnature(s)]
	Name:	NAN		POSANG	Title:	MG	1Ĉ	
Signatu Printed	re: Name:	misty CHU.	oher i	en Rayzo	Title:	M	SL	
Signatu Printed	re: Name:				Title:			
Signatu Printed	re: Name:				Title:			·
Signatu Printed	re: Name:				_ Title:			
Signatu Printed	re: Name:				Title:			
Signatu	re of C		Vice Cha	rman, Director, or Geen selected, an Inc		nust sig	n.	
			rtnership al Partner.	or Limited Liabili	ty Partners	ship:		
			rtnership neral Partn	or Limited Liabilit ers.	y Limited	<u>Partne</u>	rship:	
All other		ı authori:	zed person					
Fees:								
	Fees fo		:	of Organization:	\$25.00 \$125.00 \$30.00 (C \$5.00 (Op	•	•	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

office of the Limited Liability Company is: ing Address: D. Box 880165 ca Raton, FL 34488 e., & Registered Agent's Signature: nt. You must designate an individual or another
office of the Limited Liability Company is: ing Address: D. Box 880165 ca Raton, FL 34488 e., & Registered Agent's Signature:
ing Address: D. Box 880165 ca Raton, FL 34488 e., & Registered Agent's Signature:
D. Box 880165 ca Raton, FL 34488 c., & Registered Agent's Signature:
e, & Registered Agent's Signature:
e, & Registered Agent's Signature:
e, & Registered Agent's Signature: nt. You must designate an individual or another
ed agent are:
NOT acceptable)
33462
Zip
t service of process for the above stated limited rtificate, I hereby accept the appointment as orther agree to comply with the provisions of all ance of my duties, and I am familiar with and agent as provided for in Chapter 605, F.S
t run

ARTICLE IV-

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

<u> Citle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
MGR	NANTAWAN POSANG
	2827 HELM COURT, UNIT 104
	LANTANA, FL 33462
MGR	CHRISTOPHER RONZO
	2827 HELM COURT, UNIT 104
	LANTANA, FL 33462
Use attachment if necessary)	
Use attachment if necessary)	
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Use attachment if necessary) LE V: Other provisions, if any.	
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REQUIRED SIGNATURE: Signature of a member of this document is executed in accordance.	or an authorized representative of a member ance with section 605.0203 (1) (b), Florida Statutes. I am aware that
REQUIRED SIGNATURE: Signature of a member of this document is executed in accordany false information submitted in a document i	or an authorized representative of a member nece with section 605.0203 (1) (b), Florida Statutes. I am aware that ocument to the Department of State constitutes a third degree felony
REQUIRED SIGNATURE: Signature of a member of this document is executed in accordance.	nce with section 605.0203 (1) (b), Florida Statutes. I am aware that
REQUIRED SIGNATURE: Signature of a member of this document is executed in accordany false information submitted in a document i	conce with section 605.0203 (1) (b), Florida Statutes. I am aware that occument to the Department of State constitutes a third degree follony
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Signature of a member of any false information submitted in a dot as provided for in s.817.155, F.S.	conce with section 605.0203 (1) (b), Florida Statutes. I am aware that occument to the Department of State constitutes a third degree follony