L19000076562

(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:					

Office Use Only



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U3/18/19--U1019--U18 **150.0U

2019 MAR 18 AH 8: 59
BECHETARY OF STATE
ALLAHASSEF FERSION

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT:	
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert and Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.	Other
Please return all correspondence concerning this matter to:	
Deval Dalhasal	
(Contact Person)	
(Firm/Company)	
(Address)	
(City. State and Zip Code)	
E-mail Address: (to be used for future annual report notifications)	
For further information concerning this matter, please call:	
(Name of Contact Person) at (863 453 2335 (Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount: (All checks processed by this office must be payable i dollars and drawn on a bank located in the United States)	n US
\$\sum_{\text{S150.00 Filing Fees}} \Bigcup_{\text{S155.00 Filing Fees}} \Bigcup_{\text{S180.00 Filing Fees}} \Bigcup_{\text{S185.00 Filing Fees}} \Bigcup_{\text{S185.00 Filing Fees}} \Bigcup_{\text{S185.00 Filing Fees}} \Bigcup_{\text{S185.00 Filing Fees}} \Bigcup_{\text{Certified Copy}} \Bigcup_{\text{certified Copy}} \Bigcup_{\text{certified Copy}} \Bigcup_{\text{and Certificate of Status}} \Bigcup_{\text{Certified Copy}} \Bigcup_{cer	
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building MAILING ADDRESS: New Filing Section Division of Corporations Division of Corporations P. O. Box 6327	

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 <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: LIVE FAST INVEST HENTS (NC #P05 - 146064	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	etc.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, the name of the country)	
on 10-31-05 (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:
LIVE FAST INVESTMENTS WE	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: 1-10-19. (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	
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 20 day of February	20 19
Signature of Authorized Representative of Limi	
Signature of Authorized Representative: By Munity	uyend
Printed Name: By Much	Title: M6L Goton ML
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: DS M42005 Signature: WWW WYW South	
Printed Name: BJ MG20A	Title: 15.00 / CT
[· NICL [· A	Title.
Signature: Mu Myu South	
Printed Name JESSICA MUSCO SMITH	Title: V /
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title;
Signature:Printed Name:	Tide
Finicu (vanic.	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In-	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnershin:
Signature of one General Partner.	<u>.,</u>
10.51	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
Signatures of ALL General Fathers.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
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 - Nam		· io·		
The name of the Lif	nited Liability Company	15.		
,	ut Tac- Was	م، سنا،		
	IVE FAST INVESTMENT to contain the words "Limited Lia			· " ₁
(wite	e contain the words. Elimited Dia	omiy Company.	5.1C., (II 151.C	·)
ARTICLE II - Add The mailing address		e principal o	ffice of the Lit	mited Liability Company is:
Principal Office A	ddress:	<u>Mailin</u>	g Address:	
182 BOYD	courser RD	(0)	2 604D W	NKC RD
_	L 33613		2 604 D CO	L 33673
(The Limited Liability Co.	gistered Agent, Registe mpany cannot serve as its own R tive Florida registration.)			
The name and the F	lorida street address of th	ne registered	agent are:	
	BJ 1420	Ŋ		
	BJ MUZO	ame	-	_
	182 BOYO	CONACT	RD	
	Florida street address (I			_)
	WAUCHULA	FL_	33e73	
	WAUCHULA City		Zip	_
liability compa registered agent a statutes relating	iny at the place designate, and agree to act in this cap to the proper and completigations of my position as	d in this certinacity. I further performant registered a	ficate, I hereby her agree to co ace of my dutie gent as provide	ess for the above stated limited vaccept the appointment as omply with the provisions of all is, and I am familiar with and ed for in Chapter 605, F.S
	Registered Agent's S	Signature (RI	EQUIRED)	

(CONTINUED)

Α	D	T	ı	~		Ľ	I	٦/	
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The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager HGL	BS MCLEOD VER BOYD COMPUT AD WALLIUM A 33613
MOR	LESSIAL SMITH LED BOLD CONTACT RD WALLHUA F 33873
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
I his document is executed in accordance	r an authorized representative of a member e with section 605.0203 (1) (b). Florida Statutes. I am aware that the Department of State constitutes a third degree felor
By nc	vned or printed name of signed
T ₃	aned or printed name of cianco

Typed or printed name of signed

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)