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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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#### **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: K SIMS CAPITAL LLC (Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
KEUN DANOW 1Z (Contact Person)
LK SIMS Capital LLC (Firm/Company)
9838 Rennes Lane (Address)
Delray Beach, FL 33446 (City, State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Way Danowtz at (858) 472-3278 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
■ \$150.00 Filing Fees (\$25 for Conversion & S125 for Articles of Organization)  ■ \$155.00 Filing Fees and Certified Copy  S180.00 Filing Fees and Certified Copy  Certified Copy, and Certificate of Status
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 Arti	cles of Conversion is:
LK SIMS CADITAL LLC (Enter Name of Other Business Entity)	<u> </u>
2. The "Other Business Entity" is a	mon law or business trust, etc.)
First organized, formed or incorporated under the laws of	he name of the country)
on 3/19/2014 (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Ar	rticles of Organization:
LK SIMS CAPITAL LLC (Enter Name of Florida Limited Liability Company)	<u>_</u> .
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 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 document's effective date on the Department of State's records.	90 calendar days after
5. The plan of conversion has been approved in accordance with all applicable statutes	5.
6. The "Converted or Other Business Entity" has agreed to pay any members having apprawhich such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	aisal rights the amount to 19 APR 22 AM 9: 00

Signed this 16th day of April	20 <u>1</u> 9		
Signature of Authorized Representative of Lim	ited Liability Company:		
Signature of Authorized Representative:	Title:Partner	<del>-</del>	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]		
Signature:	_Title:partner	_	
Signature:Printed Name:	Title:	_	
Signature:Printed Name:			
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	Officer.	-	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:		<del>1</del> 9
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	1. j.	MPR 22
All others: Signature of an authorized person.		t a only	AM 9: 00
Fees:		果花	}; )()
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

<b>ARTICLE I - Name:</b> The name of the Limited Liability Company is:		
LK SIMS CAPITAL LLC (Must contain the words "Limited Liability	Company, "L.L.C.," or "L.L.C")	
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liab	ility Company is:
Principal Office Address:	Mailing Address:	
9838 Rennes Lane Delray Beach Fl 33446	9833 Ronnes Lane Delray Beach FL 33	446.
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's S red Agent. You must designate an individua	ignature: il or another
The name and the Florida street address of the re-	gistered agent are:	
<u>Keun Danowtz</u> Name	·	
9838 Rennes L	ane	
Florida street address (P.O.		
<u>Delray Beach</u> City	FL 33446	
City	Zip	
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete peacept the obligations of my position as regis	his certificate, I hereby accept the y. I further agree to comply with w erformance of my duties, and I am	e appointment as the provisions of all familiar with and
		19 7.33 7.34 7.34 7.34 7.34 7.34 7.34 7.34
Registered Agent's Signa	ture (REQUIRED)	MFR 22
(CONTINU	ED)	M 9: 00

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

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
ANBR	VEIND DADONAD
7(1)	Keun Danomtz 9838 Rennes lane
	Delray Beach FL 33446
AMBR	LUCY KIM
	9838 Ronnes Lane
	Delray Beach FL 33446 >
	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
	<u> </u>
(Use attachment if necessary)	
( o o o accomment in necessary)	
CLE V: Other provisions, if any.	
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CLE V: Other provisions, if any.  REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:  Signature of a member or	an authorized representative of a member
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	with section 605,0203 (1) (b) Florida Statutes, Lam aware the
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a docu	e with section 605.0203 (1) (b), Florida Statutes. I am aware the timent to the Department of State constitutes a third degree felo

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)