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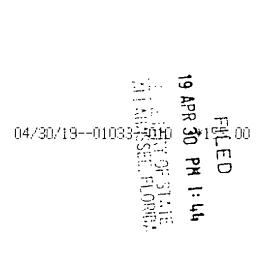
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COVER LETTER

SUBJECT: SAMAU	MA LLC			
		ulting Florida Limite	d Com	pany)
				I fees are submitted to convert an "Othe cordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g this matter to:		
KEVIN CORREA				
	(Contact Person)			
GREENSPOON MARD	ER LLP			
	(Firm/Company)	_		
600 BRICKELL AVEN	JE SUITE 3600			
	(Address)			
MIAMI FLORIDA 3313	0			
((City, State and Zip Code)			
KEVIN.CORREA@GM	LAW.COM			
E-mail Address: (to b	e used for future annual re	port notifications)		
For further informati	on concerning this ma	tter, please call:		
KEVIN CORREA		at (954	49111	20
(Name of Conta	et Person)	(Area Code)	(Day	20 time Telephone Number)
	or the following amou a bank located in the		ocess	ed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing I and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
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Division of Corporat		Divisior P. O. Be	of C ox 632	orporations

INHS11 (7/17)

Tallahassee, FL 32301

TO: New Filing Section
Division of Corporations

COVER LETTER

то:	New Filing Se Division of Co				
SHR	JECT: SAMAUN	MA LLC			
SUD	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Name of Res	sulting Florida Lim	ited Con	npany)
					d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Pleas	e return all corre	espondence concernin	g this matter to:		
KEVI	N CORREA				
		(Contact Person)	· <u></u>	_	
GREE	ENSPOON MARDI	ER LLP			
		(Firm/Company)		_	
600 B	RICKELL AVENU	JE SUITE 3600			
		(Address)		-	
MIAN	MI FLORIDA 3313	0			
	(6	City, State and Zip Code)		_	
KEVI	N.CORREA@GM	LAW.COM			
E-	mail Address: (to b	e used for future annual re	port notifications)	_	
For fi	urther information	on concerning this ma	tter, please call	:	
KEVI	N CORREA		_at (_ ⁹⁵⁴	₎ 4911	120
	(Name of Conta	ct Person)	(Area Cod	e) (Day	time Telephone Number)
		or the following amou a bank located in the		process	sed by this office must be payable in US
(\$25 f) & \$12	50.00 Filing Fees for Conversion 5 for Articles ganization)	■\$155.00 Filing Fees and Certificate of Status	S180.00 Filin and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
New Divis Clifto 2661	EET ADDRESS Filing Section sion of Corporat on Building Executive Cent	ions er Circle	New l Divisi P. O.	Filing S ion of C Box 63	Corporations

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: SAMAUMA CORP.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the name of the country)
APRII. 19, 2018 on .
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Sama Ma 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 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 30	day of <u>APRIL</u>	20_18 .	
Signature of Autho	rized Representative	of Limited Liability Company:	
Signature of Authori Printed Name: MARI	ized Representative: A SUIANE PRAXEDEZ PA	ACHECO Title: PRESIDENT	
Signature(s) on beh	alf of Other Business <u>F</u>	Entity: {See below for required signatu	re(s)]
Si	us Swang PD	intr	
Printed Name: MARIA	A SUIANE PRAXEDEZ PA	ACHECO_Title: PRESIDENT	
Signature:	· · · · · · · · · · · · · · · · · · ·		
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
	ın, Vice Chairman, Dire	ector, or Officer. ed, an Incorporator must sign.	
If Florida General I Signature of one Gen		Liability Partnership:	
If Florida Limited I Signatures of <u>ALL</u> (Liability Limited Partnership:	
All others: Signature of an author	orized person.		

\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees:

Articles of Conversion:

Certified Copy: Certificate of Status:

Fees for Florida Articles of Organization:

9 APR 30 PH 1: 44

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:		
The name of the Limited Liability Compa	ny is:	
SAMAUMA LLC		
(Must contain the words "Limited	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limite	d Liability Company is:
Principal Office Address:	Mailing Address:	
1650 NE 115 STREET	1650 NE 115 STREET	
APT 311	APT 311	
MIAMI, FLORIDA 33181	MIAMI, FLORIDA 33181	
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of MARIA SUIANE PRAXIS 1650 NE 115 STREET All Florida street address MIAMI	f the registered agent are: EDEZ PACHECO Name	individual or another
City	Zip	
Having been named as registered agent liability company at the place designe registered agent and agree to act in this statutes relating to the proper and com accept the obligations of my position	uted in this certificate. Thereby accepacity. I further agree to complete performance of my duties, at	cept the appointment as ly with the provisions of all and I am familiar with and or in Chapter 605, F.S
Registered Agent	s Signature (REQUIRED) NTINUED)	FILED APR 30 PM 1: 44 SELIAPT OF STATE AMASSEE, FLORIDA

ARTICLE IV-

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

"AMBR" = Authorized Member "MGR" = Manager	
MGR	MARIA SUIANE PRAXEDEZ PACHECO
	1650 NE 115 STREET APT 311
	MIAMI, FLORIDA 33181
MEMBER	ADRIANE PRAXEDES PACHECO
	1650 NE 115 STREET APT 311
	MIAMI, FLORIDA 33181
MEMBER	ALESSANDRA PRAXEDES PACHECO
	1650 NE 115 STREET APT 311
	MIAMI, FLORIDA 33181

(Use attachment if necessary)	
·	
Signature of a member or This document is executed in accordance any false information submitted in a document of the state of the stat	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am award ument to the Department of State constitutes a third degree in
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am award ament to the Department of State constitutes a third degree f
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. MARIA SULANE PRAXEDEZ PACH	an authorized representative of a member to with section 605.0203 (1) (b), Florida Statutes. I am award ument to the Department of State constitutes a third degree for the ECO
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. MARIA SULANE PRAXEDEZ PACH	an authorized representative of a member to with section 605.0203 (1) (b), Florida Statutes. I am award ament to the Department of State constitutes a third degree in the ECO to be seen as a second
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. MARIA SULANE PRAXEDEZ PACH	an authorized representative of a member to with section 605.0203 (1) (b), Florida Statutes. I am award ament to the Department of State constitutes a third degree for the ECO syped or printed name of signee Filing Fees
Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155, F.S. MARIA SULANE PRAXEDEZ PACH Ty	e with section 605.0203 (1) (b), Florida Statutes. I am award ament to the Department of State constitutes a third degree function of printed name of signee Filing Fees of Organization and Designation of Registered
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. MARIA SUIANE PRAXEDEZ PACH	e with section 605.0203 (1) (b), Florida Statutes. I am award ament to the Department of State constitutes a third degree function of printed name of signee Filing Fees of Organization and Designation of Registered