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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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K. PAGE

MAY 3 0 2019

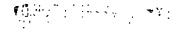


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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 6, 2019

GREGORY STEIN 1985 S OCEAN DR, MEZQ HALLANDALE BEACH, FL 33009

SUBJECT: 4TH DIMENSION LLC Ref. Number: W19000029717

We have received your document for 4TH DIMENSION LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Keyna E Page Regulatory Specialist II

Letter Number: 019A00009007

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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 26, 2019

GREGORY STEIN 1985 S OCEAN DR, MEZQ HALLANDALE BEACH, FL 33009

SUBJECT: 4TH DIMENSION LLC Ref. Number: W19000029717

We have received your document for 4TH DIMENSION LLC and your check(s) totaling \$137.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

YOU CANNOT FILE A DOMESTICATION FOR A LLC. I HAVE PROVIDED YOU WITH THE CORRECT FORMS.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Keyna E Page Regulatory Specialist II

Letter Number: 319A00005921

COVER LETTER

10:	Division of C		ons			
SUBJI	rст.	4TU	DIMBUSIA) MC	C	
0000			(Name of Res	ulting Flo	rida Limited Con	apany)
						d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	return all corr	esponde	nce concerning	g this m	atter to:	
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New F Division Clifton 2661 E	ET ADDRES iling Section on of Corporat Building Executive Cent assee, FL 323	ions er Circle	e		MAILING A New Filing So Division of C P. O. Box 632 Tallahassee, I	ection orporations 27

INHS11 (7/17)

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.
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a S CORPORATION
(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)
on 4/20/2009 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
4TH DIMENSION LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 4/25/19
(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 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 25 th day of APRIL	20_19	
Signature of Authorized Representative of Lim	ited Liability Company:	
Signature of Authorized Representative: Printed Name: CRECOPY STEIN	Title: PRESIDENT	
Signature: Signature:	[See below for required signature(s)]	
Printed Name: GREGOLY STEIN	Title: MAIRMAN / PRESIDE	NT/OWNER
Signature: Printed Name:	Title:	
Signature:	Title:	
Signature:		
Signature:		
Signature:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	Officer.	
If Florida General Partnership or Limited Liabil Signature of one General Partner.	ity Partnership:	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	tv Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	19 MAY 29 4H 8: 43
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Com	pany is:	
UTU DIMENSI	ON LLC	
(Must contain the words "Limi	ed Liability Company, "L.L.C.	," or "LLC,")
ARTICLE II - Address: The mailing address and street address	of the principal office o	f the Limited Liability Company is:
Principal Office Address:	Mailing Ado	lress:
1985 SOCEANOR, #MQ HAWANDAUEBEACY FL 33009	1985 S C HAUAN FL 331	DALE BEALLY
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.)	gistered Office, & Reg own Registered Agent, You mu	gistered Agent's Signature: ist designate an individual or another
The name and the Florida street addres	of the registered agent	are:
GREGORY ST	HN .	
	ivame	
	ANDR, #MG	
Florida street addr	ess (P.O. Box <u>NOT</u> acc	eptable)
MANANOA	LE BEAFM	33009
City	Z	ip
liability company at the place design registered agent and agree to act in the statutes relating to the proper and ca	pated in this certificate, is capacity. I further ag implete performance of , in as registered agent a	of process for the above stated limited I hereby accept the appointment as ree to comply with the provisions of all my duties, and I am familiar with and s provided for in Chapter 605, F.S RED)
(C	 ONTINUED) 	10 RA

ARTICLE IV- The name and address of each person company:	authorized to manage and control the Limited Liability				
Title: "AMBR" = Authorized Member	Name and Address:				
"MGR" = Manager MGR	GREGORY STEIN 1985 S OCEAN OR #MR HAUANPALE BEACH FL 33009				
(Use attachment if necessary)					
ARTICLE V: Other provisions, if any.					
REQUIRED SIGNATURE:					
This document is executed in accordance wany false information submitted in a document as provided for in s.817.155. F.S.	n authorized representative of a member ith section 605.0203 (1) (b). Florida Statutes, I am aware that ent to the Department of State constitutes a third degree felony				
	ed or printed name of signee				
Туре	of or printed name of signee Filing Fees				
\$125.00 Filing Fee for Articles of \$ 30.00 Certified Copy (Optional	Organization and Designation of Registered Agent S 5.00 Certificate of Status (Optional)				
	MY 29				
	\$				