190000300

(Red	questor's Name)	
(Add	dress)	
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AUG 22 2019



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July 25, 2019

RAUJIT KOMMINENI 2298 N OVERLOOK PATH HERNANDO, FL 34442

SUBJECT: SUNRISE INTERNATIONAL VENTURE, INC.

Ref. Number: W19000067856

We have received your document for SUNRISE INTERNATIONAL VENTURE, INC. and your check(s) totaling \$185.00. 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 a general partner. If the converting entity is a limited partnership or limited liability limited 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

www.sunbiz.org

Letter Number: 619A00015130

COVER LETTER

SUBJECT: Sung	ise Intern	ational Veni	tones, LLC
	(Name of Res	ulting Florida Limited Com	npany)
		-	d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return all corres	spondence concerning	g this matter to:	
Raujit K	ommineni		
	(Contact Person)		
	(Firm/Company)		
2298 N C	vedlook 7	るか	
	(Address)		
Hernando	, Florida	-34442	
1298 NO Hernando (Ci Yanit4B) E-mail Address: (to be	ty, State and Zip Code)	n	
E-mail Address: (to be	used for future annual rep	port notifications)	
For further information			
Raulit Kon	nnineni	at (248) 20	time Telephone Number)
(Name of Contact	t Person)	(Area Code) (Day	time Telephone Number)
Enclosed is a check fo dollars and drawn on a			sed by this office must be payable in US
(\$25 for Conversion	□\$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
STREET ADDRESS	•	MAILING A	ADDRESS:

New Filing Section Division of Corporations P. O. Box 6327

Tallahassee, FL 32314

INHS11 (7/17)

New Filing Section

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

New Filing Section

Division of Corporations

TO:

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.

Sensize in Tean a Desire Ventures L.L.C. (Enter Name of Other Business Entity)
(Effet Name of Callet Business Entry)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of Mich 350 (Enter state, or if a non-U.S. entity, the name of the country)
on <u>OU(105/2013</u> (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Sunside International Ventures 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

5. The plan of conversion has been approved in accordance with all applicable statutes.

document's effective date on the Department of State's records.

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 5 day of 1.15	_ 20 <u>_ · ```</u>
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative: Series Printed Name: Representative: Series Se	
Signature of Authorized Representative:San_	Title: Planage
Timed Name. April 18 18 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19	
Signature(s) on behalf of Other Business Entity:	
Signature: Raufit Komminani Printed Name: Raufit Komminani	Til 01 - 120
rinted Name: Kaufil Komminen	_ litte: Irlanases
Signature	J
Signature: Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signatura	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
C	
Signature:Printed Name:	Title:
Timed Name.	
<u> If Florida Corporation:</u>	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
lf Florida General Partnership or Limited Liabili	ty Partnershin:
Signature of one General Partner.	
<u>If Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
<u>Fees:</u>	
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

The name of the Lin	nited Liability Company is	:	
Sankisk	International	vientures, LLC	
(Mus	t contain the words "Limited Liabili	ity Company, "L.L.C.," or "LLC.")	
ARTICLE II - Add The mailing address	Iress: s and street address of the p	orincipal office of the Limited Lia	hility Company is:

ARTICLE I - Name:

Principal Office Address:	Mailing Address:
2298 in Overlook Path	2298 NO OVER LOVE PAUL
11ezpando Flozida - 34442	Heronomáci Floreda - Byylyly2-
ARTICLE III - Registered Agent, Registered	d Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

	=
Ranjit Kor	nmine-ri
	Name
2278 N C	ventuck Path
	(P.O. Box NOT acceptable)
Hennando	FL 346,47-
City	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

'AMBR" = Authorized Member	
'MGR" = Manager	Paul T Asaponinen
Mannyañ D	Paulit reprimers 1295 R GVerger Tells Frenchands Florida 34972
	Frenchands flores 34442
(Use attachment if necessary) LE V: Other provisions, if any.	
DEZMIDEN CICNATURE.	
REQUIRED SIGNATURE:	
Parit	
Signature of a member of This document is executed in accordance any false information submitted in a document provided for in \$ 817,155, F.S.	ument to the Department of State constitutes a tinto degree is
Signature of a member of This document is executed in accordance any false information submitted in a document provided for in \$ 817,155, F.S.	the with section 605.0205 (1) (b). Florida Statutes, 1 am aware unnent to the Department of State constitutes a third degree for
Signature of a member of This document is executed in accordance any false information submitted in a doc	the with section 605.0205 (1) (b). Florida Statutes, I am aware unnent to the Department of State constitutes a third degree for

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

ARTICLE IV-