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(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:				
(N19-78859				

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COVER LETTER

Division of Corpo				
Huvercraft, LI				
SUBJECT:	(Name of Resulti	ing Florida Limited	d Comp	pany)
	Conversion, Articles	of Organizatio	n, and	fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return all correspo	ndence concerning t	his matter to:		
Samuel Bryant				
(C Bryant Taylor Law, PLLC	ontact Person)			
(F 333 Las Olas Way, #416	irm/Company)			
Fort Lauderdale, FL 33301	(Address)			
(City, sbryant@sbttlaw.com	State and Zip Code)			
E-mail Address: (to be use	d for future annual repor	t notifications)		
For further information co	oncerning this matte	r, please call:		
Samuel Bryant	;	954 at ()	282-9	331
(Name of Contact Pe			(Dayt	ime Telephone Number)
Enclosed is a check for the dollars and drawn on a ba			ocesse	ed by this office must be payable in US
_	Certificate of	□\$180.00 Filing F and Certified Copy		☐\$185.00 Filing Fees. Certified Copy. and Certificate of Status
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle		MAILING ADDRESS: New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, Fl. 32314		

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.

(Enter Name of Other Business Entity)	
Limited Liability Company	
2. The "Other Business Entity" is a	
Indiana	
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. en	itity, the name of the country)
August 09, 2015	
On	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attache Huvercraft, 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.)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
5. The plan of conversion has been approved in accordance with all applicable sta	atutes.
 The "Converted or Other Business Entity" has agreed to pay any members having which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. 	
	<u> </u>
	<u> </u>
	€ - 1

Signed this 5th day of September	_ 209
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative:	Title: Member
Signature(s) on behalf of Other, Business Entity:	See below for required signature(s)
Signature: August Huver Printed Name: Maron Huver	Title: Member
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	
Signature:Printed Name:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	Officer. corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty 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)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

T1	
Huvercraft, LLC (Must contain the words "L	imited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address Principal Office Address:	of the principal office of the Limited Liability Company is: Mailing Address:
	4424 Main St.
4424 Main St.	
4424 Main St. Apt. 3055	Apt. 3055

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

business entity with an active Florida registration.)

Aaron Huver	
Na	ame
4424 Main St. Apt. 3	055
Florida street address	(P.O. Box <u>NOT</u> acceptable)
Jupiter	FL 33458
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)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager Aaron Huver AMBR__ 4424 Main St. Apt. 3055 Jupiter, FL 33458 (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 calendar days after the date of filing.) ARTICLE VI: Other provisions, if any.

Signature of a member or an authorized representative

(In accordance with section 605.0205 (3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Aaron Huver
Typed or printed name of signee

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)