237186

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

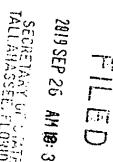
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Tropic Oil Company	у	
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		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Сеп. Сору
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
		Officer Search
		Fictitious Search
Signature		Fictitious Owner Search
8		Vehicle Search
	 _	Driving Record
Requested by: Seth	09/30/19	UCC 1 or 3 File
Name	Date Ti	UCC 11 Search
inuitio	Date 11	UCC 11 Retrieval
Walk-In	,	Courier

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 nan Tropic Oil C	ne of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
	(Enter Name of Other Business Entity)
2. The "Ot	her Business Entity" is a Corporation
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organ	ized, formed or incorporated under the laws of
	(Enter state, or if a non-U.S. entity, the name of the country)
on 02/06/19.	-
(date of c	organization, formation or incorporation)
Tropic Oil Co	one of the Florida Limited Liability Company as set forth in the attached Articles of Organization: ompany LLC (Enter Name of Florida Limited Liability Company)
4. If not ef	fective on the date of filing, enter the effective date:
(The effect the date th	ive date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after is document is filed by the Florida Department of State.)
document's e	date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ffective date on the Department of State's records.
5. The plan	of conversion has been approved in accordance with all applicable statutes.
6. The "Cor which su	overted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to each members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.



Signature of Authorized Representative of Limited Listing Signature of Authorized Representative: Printed Name: Stephen J. Gorey Signature(s) on behalf of Other Business Entity: [See	Manager Ow for required signar President
Signature of Authorized Representative of Limited List Signature of Authorized Representative: Printed Name: Stephen J. Gorey Signature(s) on behalf of Other Business Entity: [See beh	Manager Ow for required signar President
Signature of Authorized Representative: Printed Name: Stephen J. Gorey Signature(s) on behalf of Other Business Entity: [See behalf of Other Bus	Manager ow for required signa President
Signature of Authorized Representative: Printed Name: Stephen J. Gorey Signature(s) on behalf of Other Business Entity: [See behalf of Other Bus	Manager ow for required signa President
Signature: Printed Name: Title Signature: Printed Name: Printed Name: Title Signature: Printed Name: Title Signature of Chairman, Vice Chairman, Director, or Officer. If Florida General Partnership or Limited Liability Part Signature of one General Partnership or Limited Liability Limited Liab	ow for required signa President
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Signature: Printed Name: Signature: Printed Name: Printed Name: Title Signature: Printed Name: Title Signature of Chairman, Vice Chairman, Director, or Officer. If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Florida General Partnership or Limited Liability Part Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limi	ow for required signa President
Signature: Printed Name: Slephen J. Gorey Signature: Printed Name:	President
Signature: Printed Name: Printed Name: Printed Name: Signature: Printed Name: Printed Name: Title Signature: Signature: Printed Name: Title Signature: Signature of Chairman, Vice Chairman, Director, or Officer. If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Florida General Partnership or Limited Liability Part Signature of one General Partnership or Limited Liability Limi	President
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f Florida Limited Partnership or Limited Liability Limi	iersnip:
f Florida Limited Partnership or Limited Liability Limi Signatures of ALL General Partners.	
Signatures of ALL General Partners.	ted Partnership:
All othors	
All others: Signature of an authorized person.	
regulature of an audiorized person.	
Fees:	
Articles of Conversion: \$25.0	
Fees for Florida Articles of Organization: \$125.0	n
Certificate of Status: \$5.00	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na The name of the L	me: .imited Liability Cor	mpany is:	
Tropic Oil Company	LLC		
(M	ust contain the words "Lin	nited Liability Company, "L.L.C.," or	"LLC.")
ARTICLE II - Ac The mailing addre		s of the principal office of the	e Limited Liability Company is:
Principal Office	Address:	Mailing Address	<u>s:</u>
10002 NW 89th Ave	nue		
Miami, FL 33178			
			
(The Limited Liability C	Registered Agent, Rompany cannot serve as it active Florida registration	Registered Office, & Registers own Registered Agent. You must de)	ered Agent's Signature: signate an individual or another
The name and the	Florida street addre	ess of the registered agent are	:
	Bryan Rush, ESQ. c/o	o Bryn & Associates	
		Name	
	2 South Biscayne Blv	vd., Suite 2600	
		dress (P.O. Box NOT accepta	able)
	Miami	FI. 33131	
	Cit	FL 33131 Zip	
liability com registered agent statutes relatir	pany at the place des t and agree to act in t ig to the proper and	signated in this certificate, I h this capacity. I further agree complete performance of my (process for the above stated limited ereby accept the appointment as to comply with the provisions of all duties, and I am familiar with and ovided for in Chapter 605, F.S

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:				
"AMBR" = Authorized Member					
"MGR" = Manager					
MGR	Stephen J. Gorey				
	10002 NW 89th Avenue				
	Miami, FL 33178				
(Use attachment if necessary)					
•					
CLE V: Other provisions, if any.					
REQUIRED SIGNATURE:					
	$\overline{}$				
// / /					
Signature of a member of	r an authorized representative of a member				
This document is executed in accordance	ce with section 605.0203 (1) (b), Florida Statutes. I am aware the				
any false information submitted in a doc	cument to the Department of State constitutes a third degree feld				
as provided for in s.817.155, F.S.					
Stephen J. Gorey, authorized representative of member					

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)