L19000299229

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Office Use Only	



09/20/19--01023--011 **150.00

FILED 2019 HOV 19 AH II: 36

N. SAMS



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 27, 2019

.

MATTHEW P. FLORES 1333 THIRD AVENUE S, SUITE 505 NAPLES, FL 34102 US

SUBJECT: SYNERGY ONLINE INDUSTRIES LLC Ref. Number: W19000102952

We have received your document for SYNERGY ONLINE INDUSTRIES LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please sign the highlighted area on the Conversion Form.

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.

Nadira D McClees-Sams Regulatory Specialist II

Letter Number: 719A00024232

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www.sunbiz.org



Carlo F. Zampogna, Esq. carlo@naplesbaylaw.com

Matthew P. Flores, Esq. matt@naplesbaylaw.com

December 12, 2019

Via FED EX Tracking No. 777226000017

Division of Corporations New Filing Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Synergy Online Industries LLC Ref. Number: W19000102952

To whom it may concern:

Please find the enclosed revised Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company.

Very truly yours.

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Matthew P. Flores, Esq.

COVER LETTER

TO: New Filing Section Division of Corporations

SUBJECT: SYNERGY ONLINE INDUSTRIES LLC

(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Matthew P. Flores

(Contact Person)

Zampogna Flores; PLLC

(Firm/Company)

1333 Third Avenue S. Suite 505

(Address)

Naples, Florida 34102

(City, State and Zip Code)

FILED

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Matthew P. Flores	, 239	, 261-0592
	_at ()
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

 \$150.00 Filing Fees (\$25 for Conversion \$125 for Articles of Organization) 	Status	and Certified Copy	Certified Copy, and Certificate of Status
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STREET ADDRESS:

New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

	SLURE IN FALLAHA	2019 NOV
Articles of Conversion For	SST - U	AV 61
"Other Business Entity" Into Florida Limited Liability Company		111:36

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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: SYNERGY ONLINE INDUSTRIES LLC

(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 Nevada

(Enter state, or if a non-U.S. entity, the name of the country)

February 19, 2013 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:

SYNERGY ONLINE INDUSTRIES 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 2 day of OLTAB		
Signature of Authorized Representative of Li	imited Liability Company:	
Signature of Authorized Representative:		SALARA
Signature(s) on behalf of Other Business Entity	See below for required signature(s)	
Signature:	\leftarrow	
Printed Name: Course of the	Sitle: Managray	Front
Signatura:		
Signature:		_
	Title:	-
Signature:	_	
Printed Name:		_
Signature:		- 720 FAL
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Signature: Printed Name:		19 SSE
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Signature: Printed Name:		
Printed Name:	Title:	
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If Elements Courses of		0,
If Florida Corporation: Signature of Chairman, Vice Chairman, Disco	0.07	01
Signature of Chairman, Vice Chairman, Director, or	r Officer.	
Signature of Chairman, Vice Chairman. Director, or If Directors or Officers have not been selected, an Ir	ncorporator must sign.	
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Ir If Florida General Partnership or Limited Liabil	ncorporator must sign.	
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Ir If Florida General Partnership or Limited Liabil	ncorporator must sign.	
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Ir If Florida General Partnership or Limited Liabil Signature of one General Partner.	ncorporator must sign. <u>Ity Partnership:</u>	
Signature of Chairman, Vice Chairman, Director, or	ncorporator must sign. <u>Ity Partnership:</u>	
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Ir <u>If Florida General Partnership or Limited Liabil</u> Signature of one General Partner. <u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners.	ncorporator must sign. <u>Ity Partnership:</u>	
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Ir <u>If Florida General Partnership or Limited Liabil</u> Signature of one General Partner. <u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners. <u>All others:</u>	ncorporator must sign. <u>Ity Partnership:</u>	
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Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Ir <u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner. <u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners. <u>All others:</u> Signature of an authorized person. <u>Sees:</u> Articles of Conversion:	ncorporator must sign. <u>itv Partnership:</u> i <u>tv Limited Partnership:</u> S25.00	
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Ir If Florida General Partnership or Limited Liabil Signature of one General Partner. If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners. All others: Signature of an authorized person. Fees: Articles of Conversion: Fees for Florida Articles of Organization:	ncorporator must sign. <u>ity Partnership:</u> <u>ity Limited Partnership:</u> S25.00 S125.00	
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Ir <u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner. <u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners. <u>All others:</u> Signature of an authorized person. <u>Sees:</u> Articles of Conversion:	ncorporator must sign. <u>itv Partnership:</u> i <u>tv Limited Partnership:</u> S25.00	

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SYNERGY ONLINE INDUSTRIES LLC	
(Must contain the words "Limited]	Liability Company, "L.L.C.," or "LLC,")
ARTICLE II - Address:	
The mailing address and street address of t	the principal office of the Limited Liability Company is:
	Par other of the Emined Elability Company is:
Principal Office Address:	Mailing Address:
41775 Elm Street, Unit 403	
Murrieta. California 92562	41775 Elm Street. Unit 403
	Murrieta. California 92562
	3° N
	Registered Agent's Signatere
business entity with an active Florida registration.)	the registered Agent. You must designate an individuator another
business entity with an active Florida registration.) The name and the Florida street address of Zampogna Flores, PLLC	the registered Agent. You must designate an individuator another
business entity with an active Florida registration.) The name and the Florida street address of Zampogna Flores, PLLC	the registered agent are:
business entity with an active Florida registration.) The name and the Florida street address of Zampogna Flores, PLLC	The registered agent are:
business entity with an active Florida registration.) The name and the Florida street address of Zampogna Flores, PLLC N 1333 Third Avenue S. Suite	The registered agent are:
business entity with an active Florida registration.) The name and the Florida street address of Zampogna Flores, PLLC N 1333 Third Avenue S. Suite	the registered agent are:

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-

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

. ·

. . . .

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
MGR	Lawrence A. Blv	
	41775 Elm Street, Unit 403	
	Murrieta. California 92562	
MGR	Lawrence A. Bly	
	41775 Elm Street, Unit 403	
	Murrieta, California 92562	
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		See -
		<u> </u>
(Use attachment if necessary)		0,

ARTICLE V: Other provisions, if any.

	In A Rom
any false	Signature of a member or an authorized representative of a member ument is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that information submitted in a document to the Department of State constitutes a third degree felony led for in s.\$17,155, F.S.
	aurrence & Ry
	Typed or printed name of signce
\$125.0	0 Filing Fees 0 Filing Fee for Articles of Organization and Designation of Registered Age
\$ 30.0	0 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)
