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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	. ~	`

Office Use Only

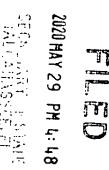
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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 22, 2020

FRED MIGEL 1 RADISSON PLAZA, STE 800 NEW ROCHELLE, NY 10801

SUBJECT: RADIANTOMORROW LLC

Ref. Number: W20000039722

We have received your document for RADIANTOMORROW LLC and your check(s) totaling \$180.00. 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

Letter Number: 720A00008385

COVER LETTER

TO:	New Filing S	ection			
	Division of C	orporations			
CUDI	FOT CARLAN	TOMORROW 1 0			
SOBJ	ECT: RADIAN	TOMORROW LLC (Name of Res	ulting Florida Limit	ed Com	npany)
		(· =:		+	·F3 /
		·	_	-	d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please	return all corre	espondence concerning	g this matter to:		
FRED	MIGEL				
		(Contact Person)			
MYUS	ACORPORATION	N.COM			
		(Firm/Company)			
1 RAD	DISSON PLAZA, S	:UITE 800			
		(Address)		•	
NIENA	DOCUELLE NEW	I VORK 10001			
IAEAA	ROCHELLE, NEW ()	City, State and Zip Code)			
INEO	@MYUSACORPO				
		e used for future annual re	port notifications)	•	
For fu	rther information	on concerning this ma	tter, please call:		
FRED	MIGEL		at (_877) 330-2	2677
	(Name of Conta	ict Person)		(Day	time Telephone Number)
		or the following amou a bank located in the		rocess	ed by this office must be payable in US
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles inization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing and Certified Cop		\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add	ress:		<u>Str</u> eet	Address:
	New Filing So	ection		New F	Filing Section
	Division of C	-			on of Corporations
	P.O. Box 632 Tallahassee, I				entre of Tallahassee N. Monroe Street, Suite 810
	i ananassee, I	L JZJ 14		∠+!J!	iv. Mionioc Sticct, Suite 610

Tallahassee, FL 32303

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Article BADIANTOMORROW LLC	es of Conversion is:
(Enter Name of Other Business Entity)	,
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY	
(Enter entity type. Example: corporation, limited partnership, general partnership, commo	n law or business trust, etc.
First organized, formed or incorporated under the laws of WISCONSIN	
(Enter state, or if a non-U.S. entity, the	name of the country)
on 10/23/2013	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Arti	cles of Organization:
RADIANTOMORROW LLC	<i>,</i>
(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 9 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 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 apprais which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	sal rights the amount to

Signed this 1st day of May	20_20			
Signature of Authorized Representative of Limi	ted Liability Company:			
Signature of Authorized Representative: <u>David</u> Printed Name: <u>DAVID BUGGE</u>	BuggeTitle: MEMBER	_		
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)			
Signature: David Buggs Printed Name: DAVID BUGGE				
Printed Name: DAVID BUGGE 00	Title: MEMBER	_		
Signature:		_		
Signature: Printed Name:	Title:	_		
Signature:				
Signature:Printed Name:	Title:	_		
Signature:		_		
Signature:Printed Name:	Title:	_		
Signature:				
Signature:Printed Name:	Title:	_		
Signature:		_		
Printed Name:	Title:	_		
If Florida Corporation:				
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc				
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:			
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:	221.	2020	
All others: Signature of an authorized person.			2020 HAY 29	The same
Fees:			PM 6: 68	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)			Carl.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

mited Liability Comp	pany is:	
st contain the words "Limite	ed Liability Company, "L.L.C.," or "LLC.")
dress:		
s and street address o	of the principal office of the Limi	ited Liability Company is
ddress:	Mailing Address:	
Y DR., APT 2209	1111 BRICKELL BAY DI	R., APT 2209
	MIAMI, FL 33131	
ompany cannot serve as its of a ctive Florida registration.) Florida street address DAVID BUGGE 1111 BRICKELL BAY	of the registered agent are: Name DRIVE, APT 2209	
	ow LLC st contain the words "Limite dress: s and street address of ddress: Y DR., APT 2209 egistered Agent, Recompany cannot serve as its contive Florida registration.) Florida street address DAVID BUGGE 1111 BRICKELL BAY Florida street address MIAMI	dress: s and street address of the principal office of the Limited decision of the Limited decision of the Limited decision of the Principal office of the Limited decision of

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..

David Bugge
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	DAVID BUGGE
	1111 BRICKELL BAY DRIVE, APT 2209
	MIAMI, FL, 33131
	
(Use attachment if necessary)	SECLULIA TALLINA
(====,,,	
	4. 2
CLE V: Other provisions, if any.	
<u> </u>	S(S)
	m _e , 📻
	
	∞
REQUIRED SIGNATURE:	
	12
vavid	Bugge

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

DAVID BUGGE

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)