# T30000/22323

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PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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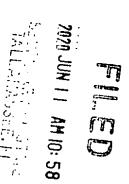
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April 15, 2020

STEPHANIE KYRIAKIDES 11517 ANDY DRIVE RIVERVIEW, FL 33569

SUBJECT: SK REP GROUP LLC Ref. Number: W20000037742

We have received your document for SK REP GROUP 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):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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: 420A00007972

# **COVER LETTER**

Division of Co				
	GROUP, LLC			
SUBJECT:		1.1 11 11 11 1.	1.0	
	(Name of Res	ulting Florida Limite	:d Com	ipany)
	· · · · · · · · · · · · · · · · · · ·	•		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:		
Stephanie Kyriakides				
SK REP GROUP, LLC	(Contact Person)			
11517 Andy Drive	(Firm/Company)			
Riverview, Florida 335	(Address) 69			
(( skrepgroup@gmail.co	City, State and Zip Code) m			
E-mail Address: (to b	e used for future annual re-	port notifications)		
For further information	on concerning this ma	tter, please call:		
Stephanie Kyriakides		561	3133	3371
(Name of Conta	ct Person)	_at (	)(Day	time Telephone Number)
	or the following amou a bank located in the		rocess	ed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing I and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Addi		-		Address:
New Filing Se				Filing Section
Division of C P.O. Box 632	•			on of Corporations entre of Tallahassee
J J OP W				The state of the s

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

# **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" immediate SK REP GROUP CORP	ly prior to the filing of the Articles of Conversion is:
(Enter Name of Other Busin	ess Entity)
2. The "Other Business Entity" is a	19-26.25
(Enter entity type. Example: corporation, limited p	artnership, general partnership, common law or business trust, etc.) Florida
First organized, formed or incorporated under the laws	of
March 22, 2019	(Enter state, or if a non-U.S. entity, the name of the country)
on	
(date of organization, formation or incorporation)	
<ol><li>The name of the Florida Limited Liability Company SK REP GROUP LLC</li></ol>	as set forth in the attached Articles of Organization:
(Enter Name of Florida Limited Liab	ility Company) March 21, 2019
4. If not effective on the date of filing, enter the effecti	ve date:
(The effective date: Cannot be prior to date of receip	
the date this document is filed by the Florida Depar	
Name of the first of the first of the state	-
	-
document's effective date on the Department of State's records.	tment of State.)
	tment of State.) e statutory filing requirements, this date will not be listed as the

Signed this 7 day of April			
Signature of Authorized Representative of Limi	ted Liability Company:		
Signature of Authorized Representative: Stupe Printed Name: Stephanic Maria Vicios	hance Lycapdes		
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)	I	
Signature: Saystania dynasia Printed Name: Arganic Variations	Title: Pres	<del></del>	
Signature:Printed Name:	Title:		
Signature:Printed Name:			
Signature:Printed Name:	_ Title:	<u> </u>	
Signature:Printed Name:	Title:	<del></del>	
Signature:Printed Name:	Title		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of If Directors or Officers have not been selected, an Inc.  If Florida General Partnership or Limited Liability Signature of one General Partner.	Officer. corporator must sign. ty Partnership:		
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:		
All others: Signature of an authorized person.		<b>2021</b> Sont	
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)	NOTE THE STATE OF	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

SK REP GROUP, LLC (Must contain the words "L	imited Liability Company, "L.L.C.," or "LLC.")	_
ARTICLE II - Address:		
The mailing address and street addre	ss of the principal office of the Limited Liability	Company i
Principal Office Address:	Mailing Address:	
11517 Andy Drive	11517 Andy Drive	
Riverview, Florida 33569	Riverview, Florida 33569	<del></del>
	Registered Office, & Registered Agent's Signa	
	its own Registered Agent. You must designate an individual or a	nother
(The Limited Liability Company cannot serve as business entity with an active Florida registration	its own Registered Agent. You must designate an individual or a	
(The Limited Liability Company cannot serve as business entity with an active Florida registration.)  The name and the Florida street address.	its own Registered Agent. You must designate an individual or a	nother
(The Limited Liability Company cannot serve as business entity with an active Florida registration.)  The name and the Florida street address.	its own Registered Agent. You must designate an individual or arm.) ess of the registered agent are:  des  Name	nother 2020 JUN 11 AM
(The Limited Liability Company cannot serve as business entity with an active Florida registration.)  The name and the Florida street address Stephanie Kyriaki Stephanie Kyriaki 11517 Andy Drive	its own Registered Agent. You must designate an individual or arm.) ess of the registered agent are:  des  Name	JUN II AM IO: 5
(The Limited Liability Company cannot serve as business entity with an active Florida registration.)  The name and the Florida street address Stephanie Kyriaki Stephanie Kyriaki 11517 Andy Drive	its own Registered Agent. You must designate an individual or are.  ess of the registered agent are:  des  Name	JUN 11 AM 10:

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..

Stephanie Lynabialis-Registered Agent's Signature (REQUIRED)

(CONTINUED)

# ARTICLE IV-

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

11517 And	e Kyriakides ndy Drive v, Florida 33569
Use attachment if necessary)  LE V: Other provisions, if any.  Signature of a member or an authorized of any false information submitted in a document to the Department as provided for in s.817.155. F.S.	ndy Drive
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