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(Re	questor's Name)	
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☐ PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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Special Instructions to	Filing Officer:	

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COVER LETTER

TO:	New Filing Solution of C						
SURII	FCT. Move Ta	ctit LLC from SC to FL,	EIN: 46-1685056				
БСБО			sulting Florida Lin		npany)		
		s of Conversion, Artic o a "Florida Limited L	_				
Please	return all corre	espondence concernin	g this matter to				
Bjorn K	Cronquist						
*******		(Contact Person)	,	_			
Tactit L	LC			_			
		(Firm/Company)					
2097 T	errabrook Ln.						
		(Address)					
Charle	ston, SC 29412						
		City, State and Zip Code)					
	ist@gmail.com			_			
E-m	ail Address: (to b	e used for future annual re	port notifications)				
For fur	ther informati	on concerning this ma	tter, please call	;			
Bjorn K	Cronquist		_at (610	_\ 751-	0028		
	(Name of Conta	ict Person)	(Area Cod	<i>)</i> e) (Day	vtime Telephone Number)		
		or the following amou a bank located in the		proces	sed by this office mus	t be payat	ole in US
(\$25 for & \$125	0.00 Filing Fees Conversion for Articles nization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filin and Certified Co	_	\$185.00 Filing Fees, Certified Copy, and Certificate of Status	Paid Check	# 1010
	Mailing Add New Filing So Division of C P.O. Box 632 Tallahassee. I	ection orporations 7		New Divis The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Sui nassee, FL 32303	ite 810	

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, Florid Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Tactit LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, e
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, e
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
01 / 04 / 2013
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization
Tactit 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.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount t

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 14th day of July	20 20
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Bjorn Kronquist	Title: Manager
Signature(s) on behalf of Other Business Entity:	
Signature:	
Signature: Printed Name: Bjorn Kronquist	Title: Manager
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:Printed Name:	TO
Printed Name:	
Signature:Printed Name:	Title
Signature:Printed Name:	Title
	Title.
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	-
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Tactit LLC	
(Must contain the words "Lim	ted Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address	of the principal office of the Limited Liability Company is
The mailing address and street address	of the principal office of the Limited Liability Company is
The mailing address and street address Principal Office Address:	of the principal office of the Limited Liability Company is Mailing Address:
Principal Office Address:	
-	Mailing Address:

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

Bjorn Kronquist	
Name	•
6701 34th Ave. N.	
Florida street address (P.O.	. Box NOT acceptable)
Saint Petersburg	FL 33710
City	Zip

Having been named as registered agent and to accept service of process for the above stated limite 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 statutes relating to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Register a 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:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	Bjorn Kronquist
WIGK	6701 34th Ave. N.
	Saint Petersburg, FL 33710
	Sauti Petersburg, FC 337 To
· ** * * * * * * * * * * * * * * * * * *	W. Alexander 19
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(Use attachment if necessary) LE V: Other provisions, if any. REQUIRED SIGNATURE:	
LE V: Other provisions, if any.	
LE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am awar
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a docu	with section 605.0203 (1) (b), Florida Statutes, I am awar
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes, I am awar
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a docu	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes. I am awarment to the Department of State constitutes a third degree
Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S. Bjorn Kroquist	with section 605.0203 (1) (b), Florida Statutes, I am awar

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)