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(Requestor's Name)	
	Address)	
`	· · ·	
(Address)	
	City/State/Zip/Phone #)	
,	Only/Otale/Zip/1 Hone #/	
PICK-UP	MAIT	MAIL
	Duning Faith Name	
(Business Entity Name)	
(Document Number)	
Certified Copies	Certificates of S	Status
Special Instructions	to Filing Officer:	
	 	





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SECRETARY OF STATE

1)

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COVER LETTER 4

TO:	New Filing Se Division of Co				
		•			
SUBJ	ECT: Plumbing	(Name of Rest	ulting Florida Limi	ted Com	npany)
Busine	ess Entity" into	of Conversion, Articl a "Florida Limited Lia	es of Organizati ability Company	ion, and	d fees are submitted to convert an 'ecordance with s. 605.1045, F.S.
Please	return all corre	spondence concerning	g this matter to:		
Lina K	urucz				
	,	(Contact Person)		_	
Plumb	ing Troopers, LL	C		_	
		(Firm/Company)			
1536 \$	SW 13th Court			_	
		(Address)			
Pomp	ano Beach, FL 33	3069 		_	
	nail Address: (to be	Sity, State and Zip Code) Let used for future annual representations and this most	port notifications)	_	
		on concerning this mat	iter, piease caii.		
Lina K			_at (<u>561</u>		6-2985
				, ,	rtime Telephone Number) sed by this office must be payable i
(\$25 fo & \$125	0.00 Filing Fees or Conversion if for Articles anization)	\$155.00 Filing Fees and Certificate of Status	S180.00 Filing and Certified Cop		Certified Copy, and Certificate of Status
	Mailing Addr New Filing Se Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7		New I Divisi The C 2415	Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 massee, FL 32303

Articles of Conversion

For

"Other Business Entity"

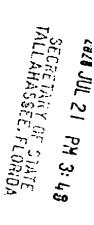
Into

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the foll "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.104 Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conver Plumbing Troopers Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business.
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the co
August 19, 2015
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Orga
Plumbing Troopers, 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 of 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 list
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

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



Signed this 10th day of July 2020	
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative: Printed Name: Lina Kurucz	VIII W
Signature of Authorized Representative:	1
Printed Name: Lina Kurucz	Title: Manager
Signature(s) on behalf of Other Business Entity:	V [See below for required signature(s)]
Signature: Printed Name: Lina Kurucz	
Printed Name: Lina Kurucz	Title: President
Signature:	
Printed Name:	Title:
G'	
Signature:	Title:
Printed Name:	Truc.
Signature:	
Printed Name:	Title:
Signature:	m: h
Printed Name:	Little:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabili	ity Partnershin:
Signature of one General Partner.	<u> </u>
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
orginates of all adminimod person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COM.

ARTICLE I - Name:		
The name of the Limited Liability Compar	ny is:	
Plumbing Troopers, LLC		
(Must contain the words "Limited I	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of t	he principal office of the Limited Liability Com	
Principal Office Address:	2 Miles of the Diffice Liability Com	
Thepar Office Address:	Mailing Address:	
1536 SW 13th Court	1536 SW 13th Court	
Pompano Beach, FL 33069	Pompano Beach, FL 33069	
business entity with an active Florida registration.) The name and the Florida street address of	•	
Akxandia	Jame Jame	
•		
1737 NW	124 Way	
Florida street address (P.O. Box NOT acceptable)	
Coral Spring	P FL 33071	
City	Zip	

Having been named as registered agent and to accept service of process for the above states liability company at the place designated in this certificate, I hereby accept the appointment registered agent and agree to act in this capacity. I further agree to comply with the provision statutes relating to the proper and complete performance of my duties, and I am familiar w accept the obligations of my position as registered agent as provided for in Chapter 605,

Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

Lina Kurucz

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR/MGR	Lina Kurucz
	1536 SW 13th Court
	Pompano Beach, FL 33069
444BD/44GD	Death an 2011 C
AMBR/MGR	Path to 3x LLC
	255 Costanera Road
	Miami, FL 33143
	
(Use attachment if necessary)	
•	
FICLE V: Other provisions, if any.	
<u>REQUIRED</u> SIGNATURE:	
	\X(QQLI)/
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 ment to the Department of State constitutes a third degree felor
as provided for in s.817.155, F.S.	ment to the Department of State constitutes a time degree letor
my processes for the diversity of the	

Typed or printed name of signee Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Ag \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional