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(Requestor's Name)	_
(Address)	_
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(City/State/Zip/Phone #)	_
(Ortyrotate/21ph Hone #)	
PICK-UP WAIT MAIL	
	_
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	_
•	
Special Instructions to Filing Officer:	7

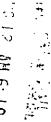
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COVER LETTER,

TO: New Filing S Division of C		•	•	
SUBJECT: Know	A Guy FL, LLC			
	(Name of Res	sulting Florida L	imited Cor	npany)
		-		nd fees are submitted to convert an "Othe ecordance with s. 605.1045, F.S.
Please return all corr	respondence concernin	g this matter (to:	
Nicole Rice				
	(Contact Person)			
I Know A Guy FL, LL0	C			
	(Firm/Company)			
14638 Avenida de Pal	ma			
	(Address)			
Winter Garden, FL 34	787			
	City, State and Zip Code)			
nricelegal@gmail.com	1			
E-mail Address: (to l	be used for future annual re	port notification	s)	
For further informati	ion concerning this ma	tter, please ca	ıH:	
Nicole Rice		at (²⁵⁶	₎ 4536	989
(Name of Cont	act Person)		ode) (Day	ytime Telephone Number)
	for the following amound a bank located in the		_	sed 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 Fi and Certified		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
<u>Mailing Add</u> New Filing S				t Address: Filing Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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 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: I Know A Guy, 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, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
12/27/2018
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
I Know A Guy FL, 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.

Signature of Authorized Representative: Dun Yuck Rice Printed Name: Dun Nick Rice Title: Owner
Signature of Authorized Representative: DUU YUCU RICE Printed Name: DVU VIUCE RICE Title: OVICE
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature: Dana Gical Rick Title: Dumer
Printed Name: White Pice Title: Quit live
Signature:
Signature: Printed Name: Title:
Signature:
Signature: Printed Name: Title:
Signature:
Signature: Printed Name: Title:
Signature:
Signature: Printed Name:Title:
Signature:
Signature: Printed Name: Title:
If Florida Corporation:
Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.
··
All others: Signature of an authorized person.
Signature of an audiorized person.
<u>Fees:</u>
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 COMPANY

The name of the Limited Liability Compa	any is:	
I Know A Guy FL, LLC		
(Must contain the words "Limited	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of	the principal office of the Limited Liabi	lity Company i
Principal Office Address:	Mailing Address:	
14638 Avenida de Palma	14638 Avenida de Palma	
Winter Garden, FL 34787	Winter Garden, FL 34787	 ·
ADTICLE III - Degistered Agent Degi	stared Office & Peristared Agent's Si	ignoture.
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	m Registered Agent. You must designate an individual	gnature:
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	m Registered Agent. You must designate an individual	or another
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of	m Registered Agent. You must designate an individual	l or another
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of	n Registered Agent. You must designate an individual of the registered agent are: Name	or another
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of Nicole Rice 14638 Avenida de Palm	n Registered Agent. You must designate an individual of the registered agent are: Name	or another 2 Am 6: 1
The name and the Florida street address of Nicole Rice 14638 Avenida de Palm	m Registered Agent. You must designate an individual of the registered agent are: Name	or another 2 Am 6: 1

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-

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

WAREDEN A J. LAK. I	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR / MGR	Nicola Dina
AMBR / MGR	Nicole Rice 14638 Avenida de Palma
	Winter Garden, FL 34787
	Winter Garden, FL 34787
	
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(Use attachment if necessary)	
(Use attachment if necessary) CLE V: Other provisions, if any.	
CLE V: Other provisions, if any. REQUIRED SIGNATURE:	
CLE V: Other provisions, if any.	Rice
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the nent to the Department of State constitutes a third degree felo
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the nent to the Department of State constitutes a third degree felo
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware th

\$ 5.00 Certificate of Status (Optional)

\$ 30.00 Certified Copy (Optional)