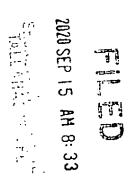
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

TÒ:	New Filing S Division of C				
CHR	JECT: LC Sale	s, LLC			
SUB	EC1:	(Name of Res	sulting Florida Lim	ted Con	npany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	e return all corr	espondence concernin	g this matter to:		
Paul A	Agbeyegbe				
		(Contact Person)		_	
L.C. 5	Sales, Inc.				
		(Firn/Company)		_	
947 N	IW 205th St				
		(Address)		_	
Miam	i, FL 33169			_	
	(1	City, State and Zip Code)		_	
Lightr	ningCountSales@	gmail.com		_	•
E-1	mail Address: (to b	oe used for future annual re	eport notifications)	_	
For fi	ırther informati	on concerning this ma	tter, please call:		
Paul /	Agbeyegbe		at (⁷⁸⁶	_\ 663-	8408
	(Name of Conta	act Person)) (Day	rtime Telephone Number)
		for the following amou a bank located in the		proces	sed by this office must be payable in US
(\$25 fc & \$12	50.00 Filing Fees or Conversion 5 for Articles anization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632	ection Corporations		New Divis	t Address: Filing Section ion of Corporations Centre of Tallahassee

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" immediately prior to the filing of the Articles of Conversion is: L.C. Sales, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation (PAOOO 65523) (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country)
8/18/20
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
LC Sales, 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.

Signed this 9th day of September	_ ₂₀ _ <u>20</u>
Signature of Authorized Representative of Lim	
Signature of Authorized Representative:	
Printed Name: Paul Agbeyegbe	Title: President
Printed Name: Paul Agbeyegbe	The Tresident
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
	fore beion for reduited signature(s)
Signature:	
Printed Name: Paul Agbeyegbe	Title: President
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
a.	
Signature:Printed Name:	m' i
Printed Name:	little:
Signatura	
Signature: Printed Name:	Title:
Timed Name.	
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
12 TR. 11 TR. 12 TR	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
orginature or all authorized 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)
Certificate of Status.	asioo (Optioliai)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Limited Liability Compa	•	
LC Sales, LLC		Liability Company, "L.L.C.," or "LLC.")	
(1)	dust contain the words "Limited	Enability Company, "L.L.C., or "Luc.)	
ARTICLE II - A The mailing addre		the principal office of the Limited	Liability Company is:
Principal Office	Address:	Mailing Address:	
947 NW 205th St		947 NW 205th St	
Miami, FL 33169		Miami, FL 33169	
(The Limited Liability business entity with a	Company cannot serve as its own active Florida registration.)	stered Office, & Registered Agent Registered Agent. You must designate an in-	dividual or another
	Paul Agbeyegbe		SP T
		Name	PIS AM 8
	947 NW 205th St		A T
	Florida street address	s (P.O. Box NOT acceptable)	<u> </u>
	Miami	FL ³³¹⁶⁹	$\frac{\partial \mathbb{Q}}{\partial t} = \mathbf{\omega}$
	City	Zip	
liability com registered agen statutes relati	apany at the place designor at and agree to act in this ing to the proper and com abligations of my position	and to accept service of process for ated in this certificate, I hereby accepacity. I further agree to comply plete performance of my duties, and as registered agent as provided for Signature (REQUIRED)	ept the appointment as with the provisions of all I I am familiar with and

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Paul Agbeyegbe
	947 NW 205th St
	Miami, FL 33169
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary) LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any. REQUIRED SIGNATURE:	
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance.	in authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance.	
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance any false information submitted in a document is a document in a doc	in authorized representative of a member with section 605,0203 (1) (b), Florida Statutes. I am aware them to the Department of State constitutes a third degree felo
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance of any false information submitted in a document as provided for in s.817.155, F.S. Paul Agbeyegbe	

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

ARTICLE IV-