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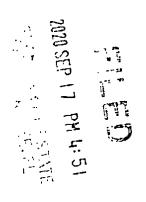
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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J. FASON OCT 0 8 2020

COVER LETTER

Division of Co	orporations			
SUBJECT: VOSA SE	PIRITS, LLC			
Sonstic 1.	(Name of Res	ulting Florida Lin	nited Cor	npany)
		-		id fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all corre	spondence concerning	g this matter to	:	
Anna Manukyan				
	(Contact Person)		_	
Legalinc Corporate Ser	vices Inc.			
	(Firm/Company)		_	
10601 Clarence DR Ste	e 250			
	(Address)		_	
Frisco TX 75033				
(C	ity, State and Zip Code)			
filings@legalinc,com				
E-mail Address: (to be	used for future annual re-	port notifications)	_	
For further information	n concerning this ma	tter, please call	:	
Anna Manukyan		at (⁸⁶⁶	757-	5850
(Name of Contac	(Person)		le) (Day	rtime Telephone Number)
Enclosed is a check for dollars and drawn on a			proces	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	S180.00 Filin and Certified C		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
New Filing Section Division of Corporations P.O. Box 6327		New Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

TO: New Filing Section

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: VOSA SPIRITS, INC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION CORPORATION Corporation Description of Property of State of S
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Eliter State, of the hold of the soundy)
06/05/2020 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
VOSA SPIRITS, 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.

20 SEP I 7 PH Կ։ 5 I

Signed this day of AUGUST	20 Z <i>O</i> .
Signature of Authorized Representative of Limi	ted Liability Company:
0	. /
Signature of Authorized Representative:	ALL MANAGES
Printed Name: SPENCER BAILEY	Title: MANAGER
Signature(s) on behalf of Other Business Entity:	See below for required signature(s
Signature: SPENCER BAILEY	
Signature:	Title: PRESIDENT
Timed Name.	
Signature:Printed Name:	ar.i
Printed Name:	litte:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	
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 In-	
WELL I CO. I D	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
orginatate of one deficial faither.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
A History of Comments	ene no
Articles of Conversion: Fees for Florida Articles of Organization:	\$25.00 \$125.00
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy:	\$25.00 \$125.00 \$30.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company is:				
VOSA SPIRITS, LLC	<u> </u>			
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address:				
The mailing address and street address of the pri	incipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
1666 KENNEDY CAUSEWAY, STE. 703	606 W. 57TH STREET			
NORTH BAY VILLAGE, FL 33141	NEW YORK, NY 10019			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the residual of the SAMUEL A. RUBERT, P.A.	cred Agent. You must designate an individual or another			
Name				
2645 EXECUTIVE PARK DRIV	/E, STE. 231-A			
Florida street address (P.O.	· · · · · · · · · · · · · · · · · · ·			
WESTON	FL 33331			
City	Zip			
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate. I hereby accept the appointment as ty. I further agree to comply with the provisions of alterformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S			

(CONTINUED)

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	5.44 54 6054655
MGR	BAILEY, SPENCER
	606 W. 57TH STREET
	NEW YORK, NY
MGR	HOGARTH, HUNTER
	15 GRAYVIK DRIVE
	KEY LARGO, FL 33037
(Use attachment if necessary)	
ARTICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	2020 ?::
(woll-	2020 SEP
	<u> </u>

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 any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SPENCER BAILEY

Typed or printed name of signee

Filing Fees

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