# L20000325863

(Re	questor's Name)	
(Ad	dress)	
·	dress)	
(Cit	y/State/Zip/Phone	∋ #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	me)
(	<b>,</b>	··- <b>,</b>
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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#### **COVER LETTER**

	New Filing S Division of C				
SHRIF	CT. Jade Bla	ck Eyewear LLC			
SODAL		(Name of Res	ulting Florida Limi	ted Con	npany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please r	eturn all corr	espondence concernin	g this matter to:		
Juan Zu	niga				
		(Contact Person)		-	
Estuniga	a, Inc.				
		(Firm/Company)		-	
462 SW	Port St Lucie	Blvd, 116			
		(Address)		-	
Port St L	_ucie FL 34953	3			
	((	City, State and Zip Code)		-	
juan@es	stuniga.com				
E-ma	il Address: (to b	e used for future annual re	port notifications)	-	
For furt	her informati	on concerning this ma	tter, please call:		
Juan Zu	niga		_at (	,203-7	7702
	(Name of Conta	ct Person)	(Area Code)	./ (Day	time Telephone Number)
		or the following amou a bank located in the	•	rocess	sed by this office must be payable in US
(\$25 for G	Conversion or Articles	☐S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
]	Mailing Add New Filing So Division of C P.O. Box 632	ection orporations		New I Divisi	Address: Filing Section on of Corporations entre 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 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:  Jade Black Eyewear LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company  (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)
April 16, 2018
April 16, 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:
Jade Black Eyewear 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 SEPTEMBEL	_ 20 <u>_ <b>2</b> </u>		
Signature of Authorized Representative of Limi			
Signature of Authorized Representative: Printed Name: Juan Zuniga	Title: COO of Estuniga, Inc.		
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]		
Signature:	Title:		
Signature:			
Printed Name:	Title:		
Sionature:			
Signature: Printed Name:	Title:		
Signature: Printed Name:	The		
rinted Name:	Title:		
Signature:			
Printed Name:	_ Title:		
Cignoture			
Signature: Printed Name:	Title:		
If Florida Corporation:			
Signature of Chairman, Vice Chairman, Director, or Control of the Chairman Con			
If Directors or Officers have not been selected, an Inc	corporator must sign.		
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.			
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:		
All others: Signature of an authorized person.			
Fees:			
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

ARTICLE I - Name:				
The name of the Limited Liability Com	pany is:			
Jade Black Eyewear LLC				
(Must contain the words "Limit	red Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address:				
The mailing address and street address of	of the principal office of the Limited Liability Company is			
Principal Office Address:	Mailing Address:			
462 SW Port St Lucie Blvd. 116	462 SW Port St Lucie Blvd. 116			
Port St Lucie FL 34953	Port St Lucie FL 34953			
	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another			
The name and the Florida street address	of the registered agent are:			
Juan Zuniga	78			
	Name AUG			
462 SW Port St Lucie	Blvd 116			

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.

egistered Agent's Signature (REQUIRED)

Florida street address (P.O. Box **NOT** acceptable)

City

Port St. Lucie

(CONTINUED)

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:			
"MGR" = Manager AMBR, MGR	Estuniga, Inc. 462 SW Port St Lucie Blvd 116			
	Port St Lucie FL 34953			
<del> </del>				
(Use attachment if necessary)				
ARTICLE V: Other provisions, if any.				
REQUIRED SIGNATURE:	Jum Jung:			
This document is executed in accordance	an authorized representative of a member with section 605.0263 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony			
Juan Zuniga				
$-\frac{1}{T_{\Sigma}}$	ned 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)