L2000003361416

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

Office Use Only



700338711077

700333711077 01/23/20-01023-002 **150.00

· MANNINI COLLE

COVER LETTER

Division of Cor				
Smoshe, Li	•			
SUBJECT:	(Name of Res	ulting Florida Lin	uited Con	unany)
	of Conversion, Articl "Florida Limited Li	les of Organiza ability Compar	tion, and ny" in ac	d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
David Mitchell		,		
Smoshe	(Contact Person)		_	
75 NW 46th Street	(Firm/Company)		_	
Miami, FL 33127	(Address)			
(City info@smoshe.com	y, State and Zip Code)		_	
E-mail Address: (to be u	ised for future annual rep	port notifications)	_	
For further information	concerning this mat	ter, please call	•	
David Mitchell		305 at (494-7	7442
(Name of Contact	Person)		e) (Day	time Telephone Number)
Enclosed is a check for dollars and drawn on a			process	ed by this office must be payable in US
(\$25 for Conversion a	\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filin and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Addres New Filing Sect Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations		New F Divisi The C	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

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: Smoshe, LLC
(Enter Name of Other Business Entity)
LLC
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc. Louisiana
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
04/12/2017
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: Smoshe, 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 30	day of October	20 <u>_20</u>
	thorized Representative of Lim	
Signature of Aut Printed Name: De	thorized Representative:	Title: Owner
Signature(s) on	hehalf of Other Business Entity:	See below for required signature(s)
Signature: Printed Name:	Vid Mitchell Mitchell	Title: Owner
Signature: Printed Name:		Title:
Signature: Printed Name:		
		Title:
Signature:		
Signature:		
Printed Name:		Title:
If Directors or O	oration: irman, Vice Chairman, Director, or fficers have not been selected, an In ral Partnership or Limited Liabili	corporator must sign.
Signature of one		<u> </u>
	ed Partnership or Limited Liabili L General Partners.	ty Limited Partnership:
All others: Signature of an a	uthorized person.	
Fees:		
Fees for Certified	of Conversion: Florida Articles of Organization: Copy: te of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Smoshe, LLC (Mus	and the second s	
	st contain the words "Limited La	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Add The mailing address		e principal office of the Limited Liability Company
Principal Office Ac	ddress:	Mailing Address:
75 NW 46th Street		75 NW 46th Street
Miami, FL 33127		Miami, FL 33127
(The Limited Liability Corbusiness entity with an ac	impany cannot serve as its own Rective Florida registration.)	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
(The Limited Liability Corbusiness entity with an ac	mpany cannot serve as its own R	Registered Agent. You must designate an individual or another
(The Limited Liability Corbusiness entity with an ac	ompany cannot serve as its own Foctive Florida registration.) Florida street address of to David Mitchell	Registered Agent. You must designate an individual or another
(The Limited Liability Corbusiness entity with an ac	ompany cannot serve as its own Foctive Florida registration.) Florida street address of t David Mitchell	Registered Agent. You must designate an individual or another he registered agent are:
(The Limited Liability Corbusiness entity with an ac	mpany cannot serve as its own Foctive Florida registration.) Florida street address of t David Mitchell N 75 NW 46th Street	Registered Agent. You must designate an individual or another he registered agent are:
(The Limited Liability Corbusiness entity with an ac	mpany cannot serve as its own Foctive Florida registration.) Florida street address of t David Mitchell N 75 NW 46th Street	he registered agent are:

(CONTINUED)

ARTICLE IV-

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

UARADDU — A .1. 1 154 1	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
OWNER / AMBR	David Mitchell
	75 NW 46th Street
	Miami FL 33127
AMBR	Mandeep Suri
	75 NW 46th Street
	Miami, FL 33127
	· · · · · · · · · · · · · · · · · · ·
	
(Use attachment if necessary)	
(Ose attachment if necessary)	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
	W
REQUIRED SIGNATURE:	W
REQUIRED SIGNATURE: Signature of a member or a	an authorized representative of a member
Signature of a member or a	with section 605.0203 (1) (b), Florida Statutes, I am aware th
Signature of a member or a This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree felor
Signature of a member or a This document is executed in accordance any false information submitted in a document is a document in a document i	with section 605.0203 (1) (b), Florida Statutes, I am aware the

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)

