L2100031250

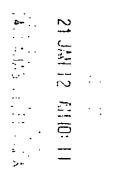
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	<u> </u>
(0).	systates zipri none #	,
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
(50	out in the state of the state o	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
	_	
!		
		}
L		

Office Use Only



400357906134

01/12/21--01017--033 **180.00



D OKEEFE FEB -2 202

COVER LETTER

TO: New Filing S				
Division of C	•			
SUBJECT:	STARTERS, LLC			
	(Name of Re	sulting Florida Limi	ited Company)	
The enclosed Article Business Entity" into	es of Conversion, Artic o a "Florida Limited L	les of Organizati	tion, and fees are submitted to convergy in accordance with s. 605.1045, F	t an "Other .S.
Please return all corr	respondence concernin	g this matter to:		
Anthony Morales				
MyUSACorporation.co	(Contact Person) om		_	
1 Radisson Plaza, Su	(Firm/Company) ite 800		_	
New Rochelle, New Y	(Address) ork, 10801		_	
info@myusacorporatio	City, State and Zip Code) on.com		-	
E-mail Address: (to b	oe used for future annual re	port notifications)	_	
For further informati	on concerning this ma	tter, please call:		
Anthony Morales		877	3302677	
(Name of Conta	act Person)	_at (c) (Daytime Telephone Number)	
Enclosed is a check to dollars and drawn on	for the following amou a bank located in the	nt: (All checks p United States)	processed by this office must be paya	ble in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing and Certified Cop	-	
Mailing Add New Filing S Division of C P.O. Box 632	ection orporations		Street Address: New Filing Section Division of Corporations The 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 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: ROOM STARTERS, 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 Texas
(Enter state, or if a non-U.S. entity, the name of the country)
on <u>05/14/2019</u>
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
ROOM STARTERS, 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 th	his 30th	_ day of _December	20 <u></u>
01	e		" 11 1 1 1 1
Signature of Authorized Representative of Limited Liability Company:			
Signatur	e of Authori	zed Representative:	
Printed N	Vame: CHRIST	OPHER NOWAK	Title: MEMBER
		<u> </u>	
Signatur	re(s) on beha	lf of Other Business Entity	: [See below for required signature(s)]
	/		-
Signature Printed N	e: Jame: CHRIST	OPHER NOWAK	Title: MEMBER
rinkeur	чанс. <u> от по т</u>	0711277770777	Title.
Signature	e:	······································	
Printed N	Vame:		Title:
Signature	0:	 	Title:
Printed P	vame:		1 me:
Signaturo	3:	,	
Printed N	lame:		Title:
Signature	e:		The state of the s
Printed N	Name:		Title:
Signature	ъ.		
Printed N	Vame:		Title:
			
	a Corporati		0.00
		, Vice Chairman, Director,	
II Directo	ors or Unicei	s have not been selected, an	incorporator must sign.
If Florid	a General P	artnership or Limited Liab	oility Partnership:
	e of one Gene		
-			
		artnership or Limited Liab	ility Limited Partnership:
Signature	es of ALL G	eneral Partners.	
All other	rs:		
	e of an author	ized person.	
Ü		•	
Fees:			
	untialar -60		#25 AA
=	Articles of Co	onversion: da Articles of Organization	\$25.00 : \$125.00
	ces for Flori Certified Cop	-	\$30.00 (Optional)
	Certificate of		\$5.00 (Optional)
_			` '

21 J都 12 新 (0: 1

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Compa	ny is:
ROOM STARTERS, LLC	
(Must contain the words "Limited	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
789 PORT CHARLOTTE DR	789 PORT CHARLOTTE DR
PONTE VEDRA, FL 32081 ARTICLE III - Registered Agent, Regis The Limited Liability Company cannot serve as its own	789 PORT CHARLOTTE DR PONTE VEDRA, FL 3208 stered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
PONTE VEDRA, FL 32081 ARTICLE III - Registered Agent, Regis The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	ponte vedra, FL 3208 stered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
PONTE VEDRA, FL 32081 ARTICLE III - Registered Agent, Regis The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	PONTE VEDRA, FL 3208 stered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another f the registered agent are:
PONTE VEDRA, FL 32081 ARTICLE III - Registered Agent, Regis The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of INCORP SERVICES, IN	PONTE VEDRA, FL 3208 stered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another f the registered agent are:
The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of INCORP SERVICES, IN	ponte vedra, FL 3208 stered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another f the registered agent are: IC. Name
ARTICLE III - Registered Agent, Regis The Limited Liability Company cannot serve as its own business emity with an active Florida registration.) The name and the Florida street address of INCORP SERVICES, IN	ponte vedra, FL 3208 stered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another f the registered agent are: IC. Name
ARTICLE III - Registered Agent, Regis The Limited Liability Company cannot serve as its own business emity with an active Florida registration.) The name and the Florida street address of INCORP SERVICES, IN	PONTE VEDRA, FL 3208 stered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another f the registered agent are: IC. Name

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:

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
AMBR	CHRISTOPHER NOWAK	_
	789 PORT CHARLOTTE DR	-
	PONTE VEDRA, FL, 32081	-
		-
		_
	<u></u>	-
		-
	№ [_	- 2
	$-\underline{\varsigma}$	
	3*: 	. 3
	Ör.	
		- 12
(Use attachment if necessary)	:	. =
	الله الله الله الله الله الله الله الله	_
CLE V: Other provisions, if any.		
······································		
REQUIRED SIGNATURE:		
RECOINED SIGNATURE.		
		_
Signature of a member or a	an authorized representative of a member	
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware	that
	nent to the Department of State constitutes a third degree fe	lony
as provided for in s.817.155, F.S.		
CHRISTOPHER NOWAK		_
Тут	ped 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)

SPECIAL AND REVOCABLE LIMITED POWER OF ATTORNEY

TO ALL PERSONS, be it known, that INCORP SERVICES, INC., a Nevada corporation ("Grantor"), does hereby make and grant a limited and specific power of attorney to Fred Migel and appoint and constitute said individual as its attorney-in-fact ("Attorney-in-Fact"). This Special and Revocable Limited Power of Attorney hereby revokes any and all former powers of attorney given by Grantor to Attorney-in-Fact.

Attorney-in-Fact shall have the limited power and authority to undertake, commit and perform only the following acts on Grantor's behalf to the same extent as if Grantor had done so personally, all with full power of substitution and revocation in the presence:

Authority to accept appointment as registered agent on behalf of Grantor, for entities which MyUSACorporation.com, a Wyoming corporation, has purchased resident agent service on or through their account with Grantor. After each exercise of such authority, Attorney-in-Fact shall notify Grantor of the same.

TERMINATION: Unless sooner revoked or terminated by Grantor, this Special and Revocable Limited Power of Attorney shall become NULL and VOID from and after December 31, 2020.

Louise Breytenbach, Chie	of Operating Officer
STATE OF NEVADA)
) ss

)

This Special and Revocable Limited Power of Attorney was acknowledged before me on April 10, 2020, by Louise Breytenbach, as Chief Operating Officer of InCorp Services, Inc., a Nevada corporation.

Notary Public in the State of Nevada

COUNT OF CLARK

My Commission Expires: 12/11/7c 21



Dated: April 10, 2020