L21000110220

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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03/05/21--01007--001 **45.00

12/29/20--01018--002 **105.00

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MAR 1 7 2021

T. SCOTT



March 16, 2021

GLENN HINES 3810 TORREY PINES BLVD SARASOTA, FL 34238

SUBJECT: VIETNAM VICTORIA CROSS TOURS LLC

Ref. Number: W2100000887

We have received your document for VIETNAM VICTORIA CROSS TOURS LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete correct conversion application.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 421A00005561

Tyrone Scott Regulatory Specialist II New Filings 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: VIETNAM VICTORIA CROSS TOURS LLC
(Enter Name of Other Business Entity)
2 The "Other Business Entity" is a CLC clinic entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
thater 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)
07/10/2019 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: VIETNAM VICTORIA CROSS TOURS 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 Denartment of State).
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be fisted as the locument's effective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.
5. 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.

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Signed this 3RD day of MARCH	_20 <i>[21</i>
Signature of Authorized Representative of Limit	ęd Liability Company:
Signature of Authorized Representative:	Title: MGR
Printed Name: GLENN HINES	Title: MGR
Signature(s) on behalf of Other Business Enfity: [5]	See below for required signature(s)}
<i>M</i> / <i>M</i>	
Signature: Printed Nagae: Comment of the Comment of	Title: // / / / / / / 3
Signature:Printed Name:	Title:
THIRE CHARLES	
Signature:Printed Name:	Title
Signature:Printed Name:	
Printed Name:	_ Title:
Signature:	
Signature: Printed Name:	_ Title:
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 Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an 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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Con	npany is:
VIETNAM VICTORIA CROSS TOURS LL	<u>C</u>
(Must contain the words "Lim	ited Elability Company, "L. L. C.," or "LEC.")
ARTICLE II - Address:	
The mailing address and street address	of the principal office of the Limited Liability Company is:
Principal Office Address:	Martina Addison
Timeipar Office Address:	Mailing Address:
3810 TORREY PINES BLVD	PO BOX 5814
SARASOTA FL 34238	SARASOTA FL 34277
ARTICLE III - Registered Agent, R	egistered Office, & Registered Agent's Signature:
(The Lamited Liability Company cannot serve as it-	own Registered Agent, You must designate an individual or another

The name and the Florida street address of the registered agent are:

business entity with an active Florida registration.)

GLENN HINES	
}	Name
3810 FORREY PINES BI	LŸD
Florida street address	(P.O. Box <u>NOT</u> acceptable)
SARASOTA	FL ³⁴²³⁸
City	Zip

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 jamiliar 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)

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Fitle:	Name and Address:
'AMBR" – Authorized Member	
'MGR" > Manager	
MGR	GLENN HINES
	3810 TORREY PINES BLVD
	SARASOTA FL 34238
	-
	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE: Signature of a member or at	n authorized representative of a member
Signature of a member or at This document is executed in accordance wany false information summitted in a document so provided for my \$17,155, F.S.	ath section 605.0203 (1) (b). Florida Statutes, I am aware ent to the Department of State constitutes a third degree I
Signature of a member or at This document is executed in accordance wany false information summitted in a document provided for my 817 155 F.S.	ith section 605.0203 (1) (b). Florida Statutes, I am aware ent to the Department of State constitutes a third degree f
Signature of a member or at This document is executed in accordance wany false information summitted in a document provided for my 817 155 F.S.	n authorized representative of a member of section 605.0203 (1) (b). Florida Statutes. I am aware ent to the Department of State constitutes a third degree fed or printed name of signce.

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

ARTICLE IV-