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

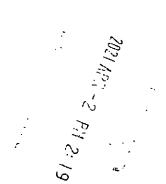
Office Use Only



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	C	ORPORATE	When y	ou need ACCESS to the world
		INC.		6th Avenue, Tallahassee, Florida 32303 6) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666
				WALK IN
			PICK UP:	4/2 Glinda
	xx	CERTIFIE	D СОРУ	
		РНОТОСО	PY	
		CUS		
	ХХ	FILING	<u>CO</u>	NVERSION
1.			Sports Manaç E AND DOCUMENT #)	gement LLC
2.		(CORPORATE NAM	E AND DOCUMENT #)	
3.		(CORPORATE NAM	E AND DOCUMENT #)	
4.		(CORPORATE NAM	E AND DOCUMENT #)	
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		(CORPORATE NAM	E AND DOCUMENT #)	

SPECIAL

INSTRUCTIONS:

Articles of Conversion For "Other Business Entity" Into

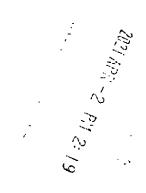
Florida Limited Liability Company

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: FLEXWORK SPORTS MANAGEMENT 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, each
(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)
09/12/2016
09/12/2016 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
FlexWork Sports Management LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 04/01/2021 [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 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.

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 <u>1st</u> day of Aprl	20 <u>21</u> .
Signature of Authorized Representative of Lin	
Example No. Authorized Representative: Printed Name: Joseph West	Title: Member
Signature(s) on behalf of Other Business Entity:	
Signature: Printed Name: Joseph West	
Printed Name: Joseph West	Title: Member
Signature:Printed Name:	Title:
Signature:Printed Name:	
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In If Florida General Partnership or Limited Liabil Signature of one General Partner. If Florida Limited Partnership or Limited Liabil	icorporator must sign. ity Partnership:
Signatures of ALL General Partners.	
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:

FlexWork Sports Mana	gement LLC		
	<u> </u>	ibility Company, "L.L.C.," or "LLC.")	
ARTICLE II - A	ddress:		
The mailing addre	ss and street address of th	e principal office of the Limited Li	ability Company i
Principal Office	Address:	Mailing Address:	
12 Sunrise Dr		12 Sunrise Dr	
C CT 02010		0 07.05040	
		cred Office, & Registered Agent's	
ARTICLE III - R			
ARTICLE III - R (The Limited Liability C business entity with an	Company cannot serve as its own R active Florida registration.)	ered Office, & Registered Agent's egistered Agent, You must designate an indivi	idual or another
ARTICLE III - R (The Limited Liability C business entity with an	lompany cannot serve as its own R	ered Office, & Registered Agent's egistered Agent, You must designate an indivi	idual or another
ARTICLE III - R (The Limited Liability C business entity with an	Company cannot serve as its own R active Florida registration.)	ered Office, & Registered Agent's egistered Agent, You must designate an indivi	idual or another
ARTICLE III - R (The Limited Liability C business entity with an	Company cannot serve as its own Ractive Florida registration.) Florida street address of t Registered Agents Inc.	ered Office, & Registered Agent's egistered Agent, You must designate an indivi	
ARTICLE III - R (The Limited Liability C business entity with an	Company cannot serve as its own Ractive Florida registration.) Florida street address of t Registered Agents Inc.	ered Office, & Registered Agent's egistered Agent You must designate an individue registered agent are:	idual or another
ARTICLE III - R (The Limited Liability C business entity with an	Company cannot serve as its own Ractive Florida registration.) Florida street address of t Registered Agents Inc. N 7901 4th St N STE 300	ered Office, & Registered Agent's egistered Agent You must designate an individue registered agent are:	idual or another 2021 APA = 2
ARTICLE III - R (The Limited Liability C business entity with an	Company cannot serve as its own Ractive Florida registration.) Florida street address of t Registered Agents Inc. N 7901 4th St N STE 300	ered Office, & Registered Agent's egistered Agent you must designate an individue registered agent are:	idual or another 2021 APA = 2 PA

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 Agem's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

"A Ad DD" - A citizanizad Adamahan	
"AMBR" + Authorized Member	
AMBR	Joseph West
· · · · · · · · · · · · · · · · · · ·	2500 Biscayne BLVD, APT 1407
	Miami, FL 33137
	199
Use attachment if necessary)	
Use attachment if necessary) .E. V: Other provisions, if any	
Use attachment if necessary) .E. V: Other provisions, if any.	
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.E V: Other provisions, if any.	
E V: Other provisions, if any.	AA
•	AAS
E V: Other provisions, if any.	AAS.
E V: Other provisions, if any. REQUIRED SIGNATURE:	an authorized representative of a member
Signature of a member or	with section 605,0203 (1) (b). Florida Statutes, I am award
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Joseph West	with section 605,0203 (1) (b). Florida Statutes, I am award ment to the Department of State constitutes a third degree f
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Joseph West	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, I am award ment to the Department of State constitutes a third degree fined or printed name of signee