L21000152462

(Reque	estor's Name)
(Addre	ss)
(Addre	ss)
(City/S	tate/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busine	ess Entity Name)
(Docur	nent Number)
Certified Copies	Certificates of Status
Special Instructions to Filin	ng Officer:

Office Use Only



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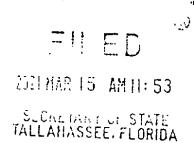
2021 MAR 15 AH II: 53
SECRETAR) OF STATE
TALLAHASSEE, FLORINA

T BURCH APR 1.2 2021

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: GOLD START, LLC	
	esulting Florida Limited Company)
Business Entity" into a "Florida Limited I	cles of Organization, and fees are submitted to convert an "Other Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	ng this matter to:
P. Todd Kennedy	
(Contact Person)	
Kennedy & Kennedy, P.L.	
(Firm/Company)	
14 Southeast 4th Street, Suite 36	
(Address)	
Boca Raton, FL 33432	
(City, State and Zip Code)	
anthony.cifelli@gmail.com	
E-mail Address: (to be used for future annual r	eport notifications)
For further information concerning this ma	atter, please call:
P. Todd Kennedy	at (561) 683-2484
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amodollars and drawn on a bank located in the	unt: (All checks processed by this office must be payable in US United States)
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees, and Certified Copy Certificate of Status
Mailing Address:	Street Address:
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
i midiidooo, i D J2317	Tallahassee, FL 32303

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:

GOLD START, LLC	
(Enter Name of Other Business Ent	ity)
2. The "Other Business Entity" is alimited liability company	
(Enter entity type. Example: corporation, limited partners	hip, general partnership, common law or business trust, etc.)
Direct name is ad. France of an income seated an death a lease of	New Mexico state, or if a non-U.S. entity, the name of the country)
(Enter	state, or if a non-U.S. entity, the name of the country)
09/20/2018 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:
GOLD START, LLC	
(Enter Name of Florida Limited Liability Co	ompany)
4. If not effective on the date of filing, enter the effective dat	
(The effective date: Cannot be prior to date of receipt or f 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 status document's effective date on the Department of State's records.	ory filing requirements, this date will not be listed as the
5. The plan of conversion has been approved in accordance w	rith all applicable statutes.
6. The "Converted or Other Business Entity" has agreed to pay which such members are entitled under ss. 605.1006 and 605	· 2 ·

Signature of Authorized Representative of Limited Signature of Authorized Representative: Printed Name: Anthony Cifelli Signature(s) on behalf of Other Business Entity: [See Signature: Printed Name: Anthony Cifelli Signature: Total Signatur	itle: Auth Rep helow for required signature(s itle: President
Signature(s) on behalf of Other Business Entity: [See Signature: Anthony Cifelli To Trinted Name: Anthony Cifelli To Trinted Name: To Signature: To Signature: To Signature: To Trinted Name: To	below for required signature(s
Signature(s) on behalf of Other Business Entity: [See Signature: ** Printed Name: Anthony Cifeff T Signature:	below for required signature(s
Signature: T Signature: T Signature: T	itle:
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Signature:T	itle:
Signature:	itle:
Signature:	
Printed Name:T	itle:
f Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or Offic	cer.
f Directors or Officers have not been selected, an Incorp	orator must sign.
f Florida General Partnership or Limited Liability P	artnorchin:
signature of one General Partner.	arthership.
f Florida Limited Partnership or Limited Liability Li	imited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Sees:	
	5.00
Articles of Conversion: \$2	.5.00 25.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
GOLD START, LLC	
(Must contain the words "Limited Liability	r Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address
Therpar Office Address.	Mailing Address:
6258 Via Palladium	6258 Via Palladium
Boca Raton, FL 33433	Boca Raton, FL 33433
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re	ered Agent. You must designate an individual or another
Anthony Cifelli	
Name	
6258 Via Palladium	
Florida street address (P.O.	Box NOT acceptable)
	 · ,
Boca Raton	FL 33433
City	Zip
liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete paccept the obligations of my position as region Registered Agent's Signature.	
(CONTINU	itu)

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

Title:	Name and Address:				
"AMBR" = Authorized Member					
"MGR" = Manager					
MGR	Anthony Cifelli				
	6258 Via Palladium				
	Boca Raton, FL 33433				
					
	As II				
**************************************	<u> </u>				
	SS: TE				
	FLS T				
	0R 10 53				
	Dr. 6				
(Use attachment if necessary)					
CLE V: Other provisions, if any.					
REQUIRED SIGNATURE:					
*/					
This document is executed in accordance	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes, I am aware the nent to the Department of State constitutes a third degree felo				
	Cifelli, Auth Rep of Member				
Тур	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)