L21000215835

(Re	questor's Name)	
(Ad	dress)	<u>-</u>
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



100362875131

04/05/21--01047--004 **150.00



COVER LETTER

TO: New Filing S Division of C					
SUBJECT: A&J SO	LUTION USA LLC				
		sulting Florida Li	mited Co	mpany)	
The enclosed Article Business Entity" into	s of Conversion, Artic o a "Florida Limited Li	les of Organiz ability Compa	ation, a ny" in a	nd fees are submitted to con accordance with s. 605.1045	ivert an "Other 5, F.S.
Please return all corr	espondence concernin	g this matter to):		
TALITA BENDILATTI					
	(Contact Person)		_		
CONNECTION CONS	ULTING, LLC				
<u></u>	(Firm/Company)				*55
7450 DR PHILLIPS BI	_VD, STE 303				
	(Address)		_		
ORLANDO, FL 32819					4. 1 · · ·
	City, State and Zip Code)		_		
	CTIONACCOUNTING.CO	NAC.			
	be used for future annual re				
					-5
For further information	on concerning this ma	ter, please cal	l:		
TALITA BENDILATTI		_at (,704-	4929	
(Name of Conta	ict Person)		le) (Daj	ytime Telephone Number)	
Enclosed is a check f dollars and drawn on	or the following amou a bank located in the	nt: (All checks United States)	proces	sed by this office must be p	ayable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180,00 Fili and Certified C		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Add	ress:		Stree	t Address:	
New Filing So	ection			Filing Section	
Division of C				ion of Corporations	
P.O. Box 632	/		The (Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

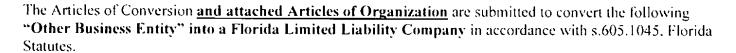
Tallahassee, FL 32314

Articles of Conversion For

"Other Business Entity"

Into

Florida Limited Liability Company



1.	The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: A&J SOLUTIONS USA CORP
	(Enter Name of Other Business Entity)
2.	The "Other Business Entity" is a CORPORATION (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
Fi	rst organized, formed or incorporated under the laws of (Enter 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)
on	05/20/2019
	(date of organization, formation or incorporation)
3.	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
	A&J SOLUTIONS USA LLC
	(Enter Name of Florida Limited Liability Company)
4.	If not effective on the date of filing, enter the effective date:
(T th	he effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after e date this document is filed by the Florida Department of State.)
<u>No</u> do:	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the cument'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 25111 day of FEBRUARY	20
Signature of Authorized Representative of Limi	ted Liability Company:
	NV)
Signature of Authorized Representative:	ullicu .
Printed Name: JULIANO AMARO FARIA	Title: AMBR
Signature(s) on behalf of Other Business Entity: Signature:	See below for required signature(s)
Signature: Printed Name: JULIANO AMARO FARIA	mi - DOEOLOGNIT
Printed Name: JULIANO AMARO FARIA	Title: PRESIDENT
Signature:	
Signature:Printed Name:	Title:
, , , , , , , , , , , , , , , , , , , ,	
Signature:	
Printed Name:	Title:
Signature:	77'.1
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title-
Signature:	
Printed Name:	Title:
If Florida Corporation:	0.00
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
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

AR	Τī	C	L.F.	1 -	Na	me:

The name of the Limited Liability Company is:

A&J SOLUTIONS USA LLC (Must contain the words "Limited Liability Company, "L.L.C.," or "L.L.C.,")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
8000 CUMBERLAND PARK DRIVE	8000 CUMBERLAND PARK DRIVE
APT 413	APT 413
ORLANDO, FL 32821	ORLANDO, FL 32821

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

CONNECTION CONSULTIN	NG, LLC
Nai	me
7450 DR PHILLIPS BLVD.	STE 303
Florida street address (P.	O. Box NOT acceptable)
ORLANDO	FL 32819
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 familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

50 6114 S- 1116.

Registered (Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

total service

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

	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	***************************************
AMBR	JULIANO AMARO FARIA
	8000 CUMBERLAND PARK DRIVE APT 413
	ORLANDO, FL 32821
	
	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	j
REQUIRED SIGNATURE:	jul
Signature of a member or This document is executed in accordance	an authorized representative of a member e with section 605.0203 (1) (b). Florida Statutes. I am aware the
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.	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes, I am aware th
Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S. JULIANO AMARO FARIA	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)