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Name:	Asset Wealth LLC
Document #:	
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Articles of Conversion For <u>"Other Business Entity"</u> 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: Luxury Experiences LLC

(Enter Name of Other Business Entity)

limited liability company

First organized, formed or incorporated under the laws of _____

(Enter state, or if a non-U.S. entity, the name of the country)

February 4, 2021 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:

Asset Wealth LLC

(Enter Name of Florida Limited Liability Company)

(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	this 12th day of May	_ 20_ 21		
	ure of Authorized Representative of Limit			
Signati Printed	ure of Authorized Representative:	Title: Manager		
<u>Signat</u>	ure(s) on behalf of Other Business Entity:	See below for required signature(s)		
Signatu Printed	ure: ////////////////////////////////////	Title: Manager		
Signatu	Ire: Kuri Roberd	Title: Manager		
	ure: I Name:			
Signaty Printed	ure:			
Signati Printed	ure:	Title:		
Cianat	ure:			
<u>If Flor</u> Signate If Dire	rida Corporation: ure of Chairman, Vice Chairman, Director, or (ectors or Officers have not been selected, an Inc	Officer. corporator must sign.		
<u>If Flor</u> Signat	r <mark>ida General Partnership or Limited Liabili</mark> ure of one General Partner.	ty Partnership:		
<u>If Flor</u> Signat	rida Limited Partnership or Limited Liabilit ures of <u>ALL</u> General Partners.	ty Limited Partnership:		
<u>All oti</u> Signat	hers: ure 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)		2821 HAY 13 PH 2:02
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Asset Wealth LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

<u>Principal_Office Address:</u>	Mailing Address:
625 Lovejoy Road NW	981 Highway 98 East Ste 3 Box 157
Fort Walton Beach, FL 32548	

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:

NRAI Services, Inc.	
	Name
1200 South Pine Island	Road
Florida street addres	s (P.O. Box <u>NOT</u> acceptable)
Plantation	FL 33324
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.

Son A. him Scott White

Assistant Secretary

Registered Agent's Signature (REQUIRED)

(CONTINUED)



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ARTICLE IV-

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

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Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Eric Lochtefeld
MGR	625 Lovejoy Road NW
	Fort Walton Beach, FL 32548
	·
MGR	Lori Lochtefeld
	625 Lovejoy Road NW
	Fort Walton Beach, FL 32548
•	
	·····
(Use attachment if necessary)	
<u>REQUIRED</u> SIGNATURE:	Mi Kort
Signature of a member of this document is executed in accordance	or an authorized representative of a member nee with section 605.0203 (1) (b), Florida Statutes. I am aware that ocument to the Department of State constitutes a third degree felony
Signature of a member This document is executed in accordan any false information submitted in a do as provided for in s.817.155, F.S.	nce with section 605.0203 (1) (b), Florida Statutes. I am aware that
Signature of a member This document is executed in accordan any false information submitted in a do as provided for in s.817.155, F.S. Eric Lochtefeld	nce with section 605.0203 (1) (b), Florida Statutes. I am aware that
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Signature of a member of This document is executed in accordan any false information submitted in a do as provided for in s.817.155, F.S. Eric Lochtefeld	nce with section 605.0203 (1) (b), Florida Statutes. I am aware that scument to the Department of State constitutes a third degree felony Typed or printed name of signee <u>Filing Fees</u> is of Organization and Designation of Registered Ager