# 121000294141

(Requestor's Name)	_
(Address)	
(Address)	—
(City/State/Zip/Phone #)	
_	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Г	$\neg$
Special Instructions to Filing Officer:	
	Ì
<u> </u>	

Office Use Only



700368246087

06/22/21--01003--009 \*\*150.00

DENNE DEL

## **COVER LETTER**

<b>TO:</b> New Filing Section Division of Corporations	
SUBJECT:	esulting Florida Limited Company)
The enclosed Articles of Conversion, Arti Business Entity" into a "Florida Limited I	icles of Organization, and fees are submitted to convert an "Other Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerni	ng this matter to:
Benedict Dipzkinski	
(Contact Person)	<del></del>
Hocker North America, LLC	
(Firm/Company)	
2336 SE Ocean Blvd #318	
(Address)	
Stuart, Florida 34996	
(City, State and Zip Code)	)
ben@hockeramerica.com	
E-mail Address: (to be used for future annual	report notifications)
For further information concerning this m	natter, please call:
BEN DIPZINSKI (Name of Contact Person)	at ( 616 ) 881 - 3328 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amodollars and drawn on a bank located in the	ount: (All checks processed by this office must be payable in US e United States)
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  \$\begin{align*} \$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing Fees and Certified Copy ☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

### **Articles of Conversion**

#### "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:  Hocker North America, 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, etc.)
Michigan First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
04/11/2016 on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Hocker North America, LLC
(Enter Name of Florida Limited Liability Company)  4. If not effective on the date of filing, enter the effective date: 6/5/2021.  (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 document's effective date on the Department of State's records.

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.

Ço

5. The plan of conversion has been approved in accordance with all applicable statutes.

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this day of <u>June</u>	_20 <b>21</b>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Benedict Dipzkinski	Title: Manager
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s)
Signature: Sendet Displicati	Title: Manager
Printed Name: Benedict Dipzkinski	Title: Manager
Signature:	
Signature: Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
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 Inc.	Officer.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
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)

4	13.0	r Y	_		Τ.	
Δ	ĸ		•	LE	4	V -

as provided for in s.817.155, F.S.

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Benedict Dipzinski
	2336 SE Ocean Blvd #318
	Stuart, Florida 34996
<del></del>	
	<u></u>
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
- Charles	
1 1	an authorized representative of a member

Ben DIPZINSKI

Typed 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)

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
Hocker North America, LLC				
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
2336 SE Ocean Blvd #318	2336 SE Ocean Blvd #318			
Stuart, Florida	Stuart, Florida			
34996	34996			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the registration.	ered Agent. You must designate an individual or another			
The fame and the Florida Street address of the re	spirited agont are.			
Benedict Dipzinski				
Name				
2336 SE Ocean Blvd #318	2336 SE Ocean Blvd #318			
Florida street address (P.O.	Florida street address (P.O. Box NOT acceptable)			
Stuart	FL 34996			
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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)