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(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	, <u> </u>
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

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T. SCOTT



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SECRETIAY OF STAFE
FAUL ARASSEE, FLORIDA

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COVER LETTER

Division of C					
SUBJECT: Abatis Ve	entures LLC				
	(Name of Res	ulting	Florida Limite	d Com	pany)
					d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g this	s matter to:		
Coltan Shain Armstron	9				
	(Contact Person)	•			
Abatis Ventures LLC					
	(Firm/Company)				
1476 Cat Mar Rd					
	(Address)				
Niceville, Florida 32578	3				
((City, State and Zip Code)				
shain@abatisventuresl	lc.com				
E-mail Address: (to b	e used for future annual re	ort n	otifications)		
For further information	on concerning this ma	ter,	please call:		
Coltan Shain Armstron	g	at i	405	308 3	708
(Name of Conta	ct Person)	'	(Area Code)	(Day	time Telephone Number)
	or the following amou a bank located in the			rocess	ed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status		\$180.00 Filing Certified Cop		S185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add New Filing So Division of C P.O. Box 632	ection orporations 7			New F Divisi The C	Address: Filing Section on of Corporations entre of Tallahassee
Tallahassee, I	L 32314			2415 I	N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Conversion

For

"Other Business Entity"

Into

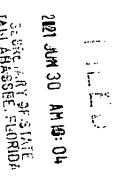
Florida Limited Liability Company

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: Abatis Ventures 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.
First organized, formed or incorporated under the laws of
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: Abatis Ventures LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: July 1, 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.
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 23	day of June	20 <u>&\ </u>
	orized Representative of Lim	
Ciamatana of Autho	prized Representative:	and
Printed Name: Colta	in Shain Armstrong	Title: Owner / Registered Agent
Timed Name.		
Signature(s) on be	half of Other Business Entity:	See below for required signature(s)
	In and	
Signature:	and and	Title Owner (Decistored Accest
Printed Name: Colta	in Shain Armstrong	Title: Owner / Registered Agent
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Ciamotura		
Drinted Name:		Title:
rinted Name		
Signature:		
Printed Name:		Title:
C:		
Signature:		Title:
rimed Name		Title.
If Florida Corpora		
	nan, Vice Chairman, Director, or	
If Directors or Office	cers have not been selected, an In	corporator must sign.
If Florida Conoral	Partnership or Limited Liabil	it: Partnershin:
Signature of one Go		ty raitiecismp.
5. 5		
If Florida Limited	Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL	General Partners.	
All others		
All others: Signature of an autl	horized nerson	
Signature of an acti	norized person.	
Fees:		
Articles of	Conversion:	\$25.00
Fees for Flo	orida Articles of Organization:	\$125.00
Certified C	ору:	\$30.00 (Optional)
Certificate	of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR ARTICLE I - Name:	EFLORIDA LIMITED LIAB	BILITY COMPANY
The name of the Limited Liability Company	vis:	
Abatis Ventures LLC		
(Must contain the words "Limited Lia	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of th	e principal office of the Limited	d Liability Company is:
Principal Office Address:	Mailing Address:	
1476 Cat Mar Rd	1476 Cat Mar Rd	
Niceville, Florida 32578	Niceville, Florida 32578	
business entity with an active Florida registration.) The name and the Florida street address of t	he registered agent are:	
Coltan Shain Armstrong		
7	ame	
1476 Cat Mar Rd	DO D. NOT.	
	P.O. Box <u>NOT</u> acceptable)	
Niceville	FL 32578	
City	Zip	
Having been named as registered agent an liability company at the place designate registered agent and agree to act in this castatutes relating to the proper and comple accept the obligations of my position as Registered Agent's	ed in this certificate, I hereby acc spacity. I further agree to compl ete performance of my duties, an s registered agent as provided fo	cept the appointment as ly with the provisions of all ad I am familiar with and
5 5		野 _い 24
(CON	ΓINUED)	221 JUN 30 AM 18: 04

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Coltan Shain Armstrong
	1476 Cat Mar Rd
	Niceville, Florida 32578
	
(Use attachment if necessary)	
ICLE V: Other provisions, if any.	

Signature of a member or an authorized representative of a member. 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 as provided for in s.817.155, F.S.

Coltan Shain Amstrong
Typed or printed name of signee

Filing Fees

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