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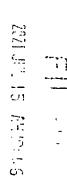
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#### **COVER LETTER**

<b>TO:</b> New Filing Section Division of Corporate	ons					
SUBJECT: Blind Parrot, LLC						
SUBJECT.	(Name of Resul	ting Florida Limi	ed Com	pany)		
The enclosed Articles of Cor Business Entity" into a "Flor	nversion, Article ida Limited Lial	s of Organizati pility Company	on, and	d fees are submitted cordance with s. 60.	to con 5.1045	vert an "Other i, F.S.
Please return all corresponde	ence concerning	this matter to:				
Charles M. Lax, Esq.						
(Conta	ect Person)		-			
MADDIN HAUSER			_			F~?
	Сотрапу)					<u> </u>
28400 Northwestern Highway,	Second Floor		_			· = 11
(A	ddress)					
Southfield, Michigan 48034					1	
(City, State	e and Zip Code)		-			
tjgusmano@gmail.com			_			
E-mail Address: (to be used fo	r future annual repo	ort notifications)	-			
For further information conc	erning this matte	er, please call:				
Charles M. Lax		248 at (	827-1			
(Name of Contact Persor	1)	(Area Code)	(Dayı	time Telephone Number	r)	
Enclosed is a check for the following and drawn on a bank			rocess	ed by this office mu	st be p	ayable in US
	.00 Filing Fees rtificate of	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees Certified Copy, and Certificate of Status	<b>s,</b>	
Mailing Address: New Filing Section Division of Corporat P.O. Box 6327 Tallahassee, FL 3231			New F Divisi The C	Address: iling Section on of Corporations entre of Tallahassee N. Monroe Street, St		0

Tallahassee, FL 32303

2321 JUL 15 AND: 47

# 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.

. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Blind Parrot, LLC	
(Enter Name of Other Business Entity)	
. The "Other Business Entity" is a  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust,	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust,	etc.)
irst organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, the name of the country)	
January 26, 2021	
(date of organization, formation or incorporation)	
. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization	n:
Blind Parrot, 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 this document is filed by the Florida Department of State.)  Sote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ocument's effective date on the Department of State's records.	
. 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 22 day of June	_ 20_21
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Thomas J. Gusmano	Title: Authorized Agent
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s)]
Signature: Printed Name: Thomas V Gusmano	
Printed Name: Thomas / Gusmano	Title: Authorized Agent
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Tivi .
Printed Name:	Title:
Signature:Printed Name:	00.1
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabili	ty Partnershin:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabilit 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)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	• •
ARTICLE I - Name: The name of the Limited Liability Company is:	2771 JUL 15 AM 10: 47
Blind Parrot, LLC (Must contain the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
19739 Beechcrest Place Estero, Florida 33928	19739 Beechcrest Place Estero, Florida 33928
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the registration.	tered Agent. You must designate an individual or another
Name	2
19739 Beechcrest Place	
Florida street address (P.O	. Box NOT acceptable)
Estero	FL 33928
City	Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p	o accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of a performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 605, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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.1	W	 C		1	v.	_

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 AMBR	Thomas J. Gusmano, Trustee of the Thomas Joseph Gusmano Revocable Living Trust Agreement dated September 16, 2014			
	19739 Beechcrest Place			
	Estero, Florida 33928			
<del></del>				
(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 that ment to the Department of State constitutes a third degree felor			
Thomas J. Gusmano, Authorized Ag				
Ту	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)