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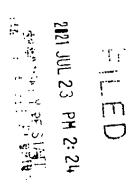
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 30, 2021

SHANKARNIVAS KURU 29564 SEDGEW BLVD WESLEY CHAPEL, FL 33544

SUBJECT: IKURU LLC Ref. Number: W21000094396

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Only non-United States entities may become a domestic limited liability company as stated in section 605.1052, Florida Statutes. You may want to explore one of the conversion options. Please return to our website sunbiz.org to download the appropriate form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Lillie S Kervin Regulatory Specialist II

Letter Number: 021A00015003

COVER LETTER

Division of C					
SUBJECT: KURU L	LC				
SUBJECT.	(Name of Res	sulting Florida Lim	ited Con	пралу)	
The enclosed Article Business Entity" into	s of Conversion, Artic a "Florida Limited L	les of Organizat iability Compan	ion, an y" in a	d fees are submitted to convectordance with s. 605.1045,	vert an "Other , F.S.
Please return all corr	espondence concernin	g this matter to:			
SHANKARNIVAS KUR	RU		_		2 8 21 JU
	(Contact Person)				<u> ج</u> الم
KURULLC			_		121 JUL 2 3
-	(Firm/Company)				ω
29564 SEDGEWAY B	LVD				9 PM 2: 25
	(Address)		_		12 N
WESLEY CHAPEL, FI	_ 33544				25
(City, State and Zip Code)		_		
SHANKAR@ ECOMG	ENIE.US				
E-mail Address: (to b	pe used for future annual re	port notifications)	_		
For further informati	on concerning this ma	itter, please call:			
SHANKARNIVAS KUR	RU	_at ()663-9	9900	
(Name of Cont	act Person)	(Area Code	(Day	rtime Telephone Number)	
	for the following amou a bank located in the		process	sed by this office must be pa	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 Filing and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee,	ection Corporations 27		New Divis	t Address: Filing Section ion of Corporations Centre of Tallahassee 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 IKURU LLC	he Articles of Conversion is:
(Enter Name of Other Business Entity)	<u> </u>
2. The "Other Business Entity" is a	1 21 J
(Enter entity type. Example: corporation, limited partnership, general partnersh	ip, common law or businesstrust, etc.)
First organized, formed or incorporated under the laws of	: 2 :: 2 :: 2
(Enter state, or if a non-U.S.	entity, the name of the country)
05-10-2018 on	*; '∵' 'S' □
(date of organization, formation or incorporation)	
KURU LLC (Enter Name of Florida Limited Liability Company)	·
4. If not effective on the date of filing, enter the effective date: (The effective date: Cannot be prior to date of receipt or filed date nor mor 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 requiremen document's effective date on the Department of State's records.	e than 90 calendar days after
5. The plan of conversion has been approved in accordance with all applicable s	statutes.
6. The "Converted or Other Business Entity" has agreed to pay any members having	ng appraisal rights the amount to

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

a l	
Signed this 07 day of JULY 20 21.	
Signature of Authorized Representative of Limited Liability Company:	
Signature of Authorized Representative: Printed Name: SHANKARNIVASKURU Fitte: OWNER/MEMBER	
Printed Name: SHANKARNIVASKURU Title: OWNER/MEMBER	
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]	
Signature: Interest of the second of the sec	
Printed Name: SHANKARNIVAS KURU Title: Owner	
Printed Name: Strick Printer / North Printer	
Signature:	
Printed Name:Title:	22 65
	* a
Signature: Title:	ہے ج
Printed Name: Title:	
Signature:	2 3
Printed Name: Title:	<u></u>
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Signature:	2:2
Printed Name:Title:	C)
Signature:	
Signature: Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer.	
If Directors or Officers have not been selected, an Incorporator must sign.	
Ti Directors of Officers have not been selected, an incorporator mass sign.	
If Florida General Partnership or Limited Liability Partnership:	
Signature of one General Partner.	
16 Florida I imited Bostovskip or I imited I ishility I imited Bostovskip.	
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.	
·	
All others:	
Signature of an authorized person.	
Signature of an audionzed person.	

\$25.00 \$125.00

\$30.00 (Optional) \$5.00 (Optional)

Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

KURU LLC			
	ust contain the words "Limited Li	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - A		e principal office of the Limited I	Liability Company is:
Principal Office	Address:	Mailing Address:	
29564 SEDGEWAY	/BLVD	29564 SEDGEWAYBLVD	
(The Limited Liability C	Registered Agent, Registe	WESLEYCHAPEL, FL 33544 ered Office, & Registered Agent legistered Agent. You must designate an indi	ividual or another 🔛
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Registe Company cannot serve as its own F active Florida registration.) Florida street address of t	ered Office, & Registered Agent Registered Agent. You must designate an indi	ividual or another 21
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Register Company cannot serve as its own Factive Florida registration.) Florida street address of the SHANKARNIVASKURU	ered Office, & Registered Agent Registered Agent. You must designate an indi	ividual or another 21 JUL 23 PH
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Register Company cannot serve as its own Factive Florida registration.) Florida street address of the SHANKARNIVASKURU N	ered Office, & Registered Agent Registered Agent. You must designate an indi the registered agent are: ame	ividual or another 21 JUL 23 PH 2: 2
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Registered Agent, Registered Agent, Registered Agent, Registered agency as its own Factive Florida registration.) Florida street address of the SHANKARNIVASKURU N 29564 SEDGEWAYBLVD	ered Office, & Registered Agent Registered Agent. You must designate an indi the registered agent are: ame	ividual or another 21 JUL 23 PH 2:
ARTICLE III - F (The Limited Liability C business entity with an	Registered Agent, Registered Agent, Registered Agent, Registered Agent, Registered agency as its own Factive Florida registration.) Florida street address of the SHANKARNIVASKURU N 29564 SEDGEWAYBLVD	ered Office, & Registered Agent Registered Agent. You must designate an indi the registered agent are: ame	ividual or another 21 JUL 23 PH 2: 2

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)

SHANKARNIVASKURU

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager	SHANKARNIVASKURU	
AMBR		
	29564 SEDGEWAYBLVD	
	WESLEYCHAPEL, FL 33544	
		# · 2 22
		2121 JUL 23
		: 2
		<u> </u>
		
		e − N
(Use attachment if necessary)	•	25 25
CLE V: Other provisions, if any.		
REQUIRED SIGNATURE:	of the	
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am awment to the Department of State constitutes a third degree	vare that

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)