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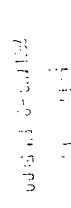
(Requestor's Name)				
(Ad	idress)			
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(Cit	ty/State/Zip/Phone	: #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
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	cument Number)			
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Certified Copies	_ Certificates	or Status		
Special Instructions to Filing Officer:				
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Office Use Only



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COVER LETTER

TO:	New Filing Section Division of Corporate								
SUBJ	ECT: SYNOZ LLC								
		(Name of Res	ulting Fl	orida Limito	ed Con	npany)			
				-		d fees are submitted t ecordance with s. 605			ther
Please	e return all correspo	ndence concerning	g this n	natter to:					
Antho	ny Morales								
	(C	ontact Person)		-					
MyUS	ACorporation.com							~;	
	(F	irm/Company)						··	!
1 Rad	isson Plaza, Suite 80	0						, š	
		(Address)		 -			,	ζ',	
New F	Rochelle, NY 10801						(. n . : . n	
	(City,	State and Zip Code)	•					.∵.	
info@	myusacorporation.com	m						ć 5	
E-n	nail Address: (to be use	d for future annual re	port noti:	fications)					
For fu	rther information co	oncerning this ma	tter, ple	ase call:					
Antho	ny Morales		_at (<u></u>	7	330-2	26-77			
	(Name of Contact Pe	rson)			/ (Day	rtime Telephone Number)			
dollar	s and drawn on a ba	ink located in the	United	States)		sed by this office mus	t be pay:	able in U	JS
(\$25 fo & \$125		S155.00 Filing Fees Certificate of tus		0.00 Filing I entified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
	Mailing Address: New Filing Section Division of Corporation P.O. Box 6327	n]	New 1 Divisi	t Address: Filing Section ion of Corporations Centre of Tallahasse			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company



The Articles of Conversion <u>and attached Articles of Organization</u> 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: SYNOZ LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
CA
Enter state, or if a non-U.S. entity, the name of the country)
05/24/2020
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
SYNOZ 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 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 to	his <u>26th</u>	day of July		_ 20 <u>_ 21</u>		
Signature of Authorized Representative of Limited Hability Company:						
Signatur	e of Authoriz	ed Representative		Title: Member		
Printed N	Vame: GEORG	E KABBABE		Title: Member		
				1140.		
Signatur	e(s) on behal	of Other Business	Entity: [ee below for required signature(s)]		
-	 -		1			
Signatur	e:		137	<u> </u>		
Printed N	lame: GEORG	E KABBABE		Title: Member		
α:			,			
Signatur	;			mt.d		
Printed N	Name:			Title:		
Cianatum						
Drinted N	r. Jame:			Title:		
Limited	18IIIE			11uc:		
Signature	••					
Printed N	lame:		··· <u>,</u>	Title:		
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Signature	: :					
Printed N	lame:			Title:		
Signature	: <u></u>					
Printed N	lame:			Title:		
	a Corporatio	_	_			
		, Vice Chairman, Dir				
II Directi	ors or Officers	have not been select	ted, an Inc	orporator must sign.		
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.						
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.						
All others: Signature of an authorized person.						
Fees:						
Δ	rticles of Cor	version:		\$25.00		
		a Articles of Organi	ization	\$125.00		
	ertified Copy		icenvu.	\$30.00 (Optional)		
	ertificate of S			\$5.00 (Optional)		
_	AT ATTACK OF C	manife).		45.00 (Ophional)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			5001 <i>f</i> (10 +0) 50 (5) (00
The name of the Limited Liability C	ompany is:		
SYNOZ LLC			
(Must contain the words "L	Limited Liability Co	ompany, "L.L.C.," or	r"LLC.")
ARTICLE II - Address: The mailing address and street addre	ess of the princ	cipal office of th	ne Limited Liability Company is:
Principal Office Address:	<u> </u>	Mailing Addres	<u>ss:</u>
1028 NORTHWEST 102 PLACE		1028 NORTHWE	ST 102 PLACE
MIAMI, FL, 33172		MIAMI, FL. 33172	?
			
business entity with an active Florida registration. The name and the Florida street additionable incorp Services, Incorp Se	ress of the regi	istered agent are	a: -
	Name		
17888 67th Court	North		
Florida street a	Florida street address (P.O. Box NOT acceptable)		
Loxahatchee		FL 33470	
C	ity	Zip	

(CONTINUED)

ARTICLE IV-

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	OFODOE VARDADE		
AMBR	GEORGE KABBABE		
	1028 NORTHWEST 102 PLACE		
	MIAMI, FL, 33172		
	42-2-2-2-2		

(Use attachment if necessary)			
(000 1111111111111111111111111111111111			
CLE V: Other provisions, if any.			
	1		
REQUIRED SIGNATURE:	6		
	Soft -		
Signature of a member or	r an authorized representative of a member		
This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes. I am aware to		
any talse information submitted in a docu as provided for in a.817.155, F.S.	ument to the Department of State constitutes a third degree fel-		
as provided to: and or vital, 1 is.			
GEORGE KABBABE			
T ₁	yped or printed name of signee		
•	Filing Fees		
\$125 00 Filing Fee for Articles	of Organization and Designation of Registered A		

\$ 5.00 Certificate of Status (Optional)

\$ 30.00 Certified Copy (Optional)

SPECIAL AND REVOCABLE LIMITED POWER OF ATTORNEY

TO ALL PERSONS, be it known, that INCORP SERVICES, INC., a Nevada corporation ("<u>Grantor</u>"), does hereby make and grant a limited and specific power of attorney to Anthony Morales and appoint and constitute said individual as its attorney-in-fact ("<u>Attorney-in-Fact</u>"). This Special and Revocable Limited Power of Attorney hereby revokes any and all former powers of attorney given by Grantor to Attorney-in-Fact.

Attorney-in-Fact shall have the limited power and authority to undertake, commit and perform only the following acts on Grantor's behalf to the same extent as if Grantor had done so personally, all with full power of substitution and revocation in the presence:

Authority to accept appointment as registered agent on behalf of Grantor, for entities which MyUSACorporation.com, a Wyoming corporation, has purchased resident agent service on or through their account with Grantor. After each exercise of such authority, Attorney-in-Fact shall notify Grantor of the same.

TERMINATION: Unless sooner revoked or terminated by Grantor, this Special and Revocable Limited Power of Attorney shall become NULL and VOID from and after December 31, 2021.

J. Brank		Dated: May 11, 202
Louise Breytenbach, Chie	of Operating Officer	
STATE OF NEVADA)	
) ss	
COUNT OF CLARK)	

This Special and Revocable Limited Power of Attorney was acknowledged before me on May 11, 2021, by Louise Breytenbach, as Chief Operating Officer of InCorp Services, Inc., a Nevada corporation.

y Public in the State of Nevada

My Commission Expires: Uctober 28,2024

JACKIE DEFILIPPIS

Notary Public, Stale of Nevada

Appcintment No. 20-7391-01

My Appt. Expires Oct 28, 2024