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(Requestor's Name)
(Requestors Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer

Office Use Only

AUS 1 7 2021

T. SCOTT



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### ALAN S. ZANGEN, P.A.

#### ATTORNEY AT LAW

ALAN S. ZANGEN\*

CHANCELLOR CORPORATE CENTER 12008 SOUTH SHORE BLVD SUITE 107 WELLINGTON, FLORIDA 33414

\* MEMBER FLORIDA BAR, NEW YORK BAR AND ILLINO'S BAR

TELEPHONE (551) 793-2400 FACSIMILE (561) 753-9966 E-MAIL: asz@/angenlaw.com

August 9, 2021

Via FedEx# 7744-8195-9550

New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

> International Meat Consultants, LLC Re: Reference No. W21000091155

Dear Mr. Tyrone Scott,

Enclosed please find the fully executed forms of The Articles of Conversion and the Articles of Organization For Florida Limited Liability Company together with your letter of July 26, 2021.

Please process the enclosed articles upon receipt of this letter. Thank you.

Sincerely,

Alan S. Zangen

Alan S. Zangen, P.A.

ASZ/ja Encs.



July 26, 2021

ALAN S. ZANGEN, P.A. 12008 SOUTH SHORE BLVD STE 107 WELLINGTON, FL 33414

SUBJECT: INTERNATIONAL MEAT CONSULTANTS, LLC

Ref. Number: W21000091155

We have received your document for INTERNATIONAL MEAT CONSULTANTS, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Conversion must be sign.

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

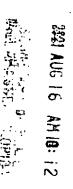
If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 021A00017449

Tyrone Scott Regulatory Specialist II New Filings Section

www.sunbiz.org

## 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:     International Meat Consultants, 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 Massachusetts (Enter state, or if a non-U.S. entity, the name of the country)
On 04/19/2019 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
International Meat Consultants, LLC (Enter Name of Plorida 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.



Signature of Authorized Representative of Lin	
Signature of Authorized Representative:  Printed Name: Philip Friend	Tib. Authorized Member
Timed Ivanie. Third I forig	
Signature(s) on behalf of Other Business Entity:	(See below for required signature(s))
Signature:	
Printed Name: Philip Friend	Title: Authorized Member
O' - A	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
Printed Manie:	
Signature:	
Printed Name:	
Signature;Printed Name;	
Printed Name:	Title:
Signature:	·
Signature;Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	corporator must sign.
lf Florida General Par <u>tnership or Limited Liablli</u>	ity Partnership:
Signature of one General Partner.	
(am 11 7 1 1 1 1 m 1 1 1 7 1 1 4 7 1 1 1 1 1 1 1 1 1 1 1 1	to I indeed Bootsovskips
if Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty I minted Fartnetsing.
<del>-</del>	
All others:	
Signature of an authorized person.	
<u>Fous:</u>	
And I am of Comment	\$25,00
Articles of Conversion: Fees for Florida Articles of Organization:	\$125.00 \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
International Meat Consultants, L (Must contain the words "Limited Liability	LC Company, "L	.L.C.," or "LLC.")	<del></del>
ARTICLE II - Address: The mailing address and street address of the pri	ncipal offic	cc of the Limit	ted Liability Company is:
Principal Office Address:	Mailing A	Address:	
19446 Waters Reach Lane	<u>.</u> .		
Boca Raton, FL 33434			-1-1-1-1
ARTICLE III - Registered Agent, Registered (The Limited Linbility Company cannot serve as its own Registe business entity with an active Florida registration.)  The name and the Florida street address of the re	red Agent, You	u musi designate ai	gent's Signature: i Individual or another
Philip Frier	nd		
Name			
19446 Waters Reach La Florida street address (P.O.			
Boca Raton	FL	33434	
City		Zip	
Having been named as registered agent and to a liability company at the place designated in t	accept serv his certifica	ice of process ; ate, I hereby ac	for the above stated limited scept 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)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Philip Friend  19446 Waters Reach Lane, Unit 501  Boca Raton, FL 33434
·——————	
	-
Use attachment if necessary)	
E V: Other provisions, if any.	
E V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.  REQUIRED SIGNATURE:	
Signature of a member or an	authorized representative of a member the section 605.0203 (1) (b), Florida Statutes. I am aware the new to the Department of State constitutes a third degree felor
Signature of a member or an This document is executed in accordance wi any false information submitted in a docume as provided for in s. 817.155, F.S.	nauthorized representative of a member lith section 605.0203 (1) (b), Florida Statutes. I am aware than to the Department of State constitutes a third degree felor lip Friend dor printed name of signee