# 121000385919

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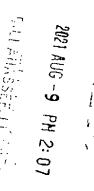




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03/15/21--01028--021 \*\*150.00

8-9-21



# COVER LETTER

| TO: New Filing Section Division of Corporations  |  |
|--|--|
| Pace Car LLC   |  |
| SUBJECT:   |  |
| (Name of Resulting Florida   | Limited Company)                                   |
| The enclosed Articles of Conversion, Articles of Organ<br>Business Entity" into a "Florida Limited Liability Com   |  |
| Please return all correspondence concerning this matter  | · to:  |
| Karen Ching-Dismal   | )  |
| (Contact Person)   |  |
| Race Car LLC  (Firm/Company)  80 Cape San Blas Way  (Address)  |  |
| (Firm/Company)   |  |
| 80 Cape San Blas Bay   |  |
| (Address)  | <del></del>  |
| Ponte Vedra, FL 3208   | <u>^1</u>  |
| (City, State and Zip Code)   |  |
| Karenchingmad ~ gmail. co  | <u>m</u>   |
| E-mail Address: (to be used for future annual report notification  | ons)   |
| For further information concerning this matter, please of  | call:  |
| Karen Ching-Tismal at 64   | 6 6208122  |
| (Name of Contact Person) (Area   | Code) (Daytime Telephone Number)                   |
| Enclosed is a check for the following amount: (All che dollars and drawn on a bank located in the United State of S150.00 Filing Fees S150.00 Filing Fees S150.00 Filing Fees and Certificate of and Certificate of S150.00 Filing Fees S150.00 Filing | is)<br>We<br>Filing Fees S185.00 Filing Fees.      |
| & \$125 for Articles Status  | Certificate of Status                              |
| of Organization)   |  |
| Mailing Address:   | Street Address:                                    |
| New Filing Section   | New Filing Section                                 |
| Division of Corporations   | Division of Corporations The Centre of Tallahassee |
| P.O. Box 6327<br>Tallahassee, FL 32314   | 2415 N. Monroe Street, Suite 810                   |
|  |  |

Tallahassee, FL 32303

# **Articles of Conversion**

For

#### "Other Business Entity"

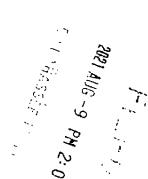
Into

# 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:   |
|--|
| (Enter Name of Other Business Entity) M2000 000 5874   |
| (Enter Name of Other Business Entity)  M2000 000 5874  2. The "Other Business Entity" is a limited liability company   partnership    (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business flust, etc.)                  |
| First organized, formed or incorporated under the laws of  |
| on April 6, 2020 (date of organization, formation or incorporation)  |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  Pace Car 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 this 4th day of Angust  | 20_21                                       |
| Signature of Authorized Representative of  |   |
| Signature of Authorized Representative:<br>Printed Name: <u>Faren Chia-7</u>                     | renal Title: authorized member partre       |
| Signature(s) on behalf of Other Business En  | tity: [See below for required signature(s)] |
| Simoner Alana Office All   | <i>(</i>                                    |
| Printed Name: Daniel 175 mal   | Title: <u>Anthorized marker partier</u>     |
| Signature:   |   |
| Printed Name:  | Title:                                      |
| Signature:   | Title:                                      |
| Printed Name:  | Title:                                      |
| Signature:   | Title:                                      |
|  |   |
| Signature:   | Title:                                      |
| Printed Name:  | Title:                                      |
| Signature:   | Title:                                      |
| Printed Name:  | Title:                                      |
| If Florida Corporation:  |   |
| Signature of Chairman, Vice Chairman, Direct<br>If Directors or Officers have not been selected. |   |
|  | · -   |
| <u>If Florida General Partnership or Limited L</u><br>Signature of one General Partner.          | Liability Partnership:                      |
| If Florida Limited Partnership or Limited L<br>Signatures of <u>ALL</u> General Partners.        | <u>ciability Limited Partnership:</u>       |
| All others:<br>Signature of an authorized person.  |   |
| Fees:  |   |
| Articles of Conversions  | \$25.00                                     |

\$25.00 Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: \$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:

| Pace Car   | LLC  |  |
|--|--|--|
| contain the words "Limited Lia   | bility Company, "L.I.,C.," or "LI  | .C.")  |
|  | principal office of the L  | imited Liability Company is:   |
| ldress:  | Mailing Address:   |  |
| Ika Fryster  | 80 Cape  | Sin Blas Way   |
| 95928  | Port ved   | 19, FL 32081   |
| ipany cannot serve as its own Ri   |  |  |
| orida street address of th   | ne registered agent are:   |  |
| United States  | Corpration   | Agents , Inc.  |
| Na   | ime  |  |
| 5575 5   | . Semoran  | Blud. Smite 36   |
| Titalian street address (1   | .O. DOX <u>reor</u> acceptable   | <b>C</b> )   |
| Orlando  | FL 37  | 2822   |
| City   | Zip  |  |
| ny at the place designated agree to act in this cap to the proper and complete gations of my position as  Registered Agent's S | d in this certificate. There pacity. I further agree to see performance of my dut registered agent as provided C for C for Gignature (REQUIRED)  | by accept the appointment as<br>comply with the provisions of all<br>ies, and I am familiar with and   |
|  | ress: and street address of the larges: lkw Frys Ten 9.7928  gistered Agent. Register of the largest and street address of the largest and registration.)  orida street address of the largest address of the largest address of the largest address of the largest address (I largest address address (I largest address address (I largest add | Address:    Mailing Address:   SU Cape     Point Veel     Point Ve |

ARTICLE IV-

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  A MBR  A MBR            | Faren Ching Tismal  80 Cape San Blac Way Porte vedra, FL 32081  Daniel Tismal 80 Cape San Blas way Panke Vedra, FL 3208   |
|  |   |
| (Use attachment if necessary)            |   |
| RTICLE V: Other provisions, if any.      |   |
| REQUIRED SIGNATURE:                      | project   |
| This document is executed in accordance  | an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that nent to the Department of State constitutes a third degree felony |
| Karen Chin                               | ped or printed name of signee   |
| 1 7                                      | ped of printed name of signed   |

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)