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Account#: 120000000088

Date:	10/18/2021		
Name:	Marcel Ogbonna-A	mu	
Reference #	1498993		
	::	SOUTHGLEN, LLC	
<u>—</u>	es of Incorporation/Authondment	orization to Transact Business	
— ☐ Reins	ge of Agent statement	FILE FIRST	ANY ISSUES, CALL MARCEL: (518) 213 - 0826 Thank you!
☐ Merg	ersion er elution/Withdrawal		
Fictiti	ous Name	. =	11-11-11
Authorized A	Amount: \$25.0	10	

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Account#: 120000000088 Date:_____10/18/2021 Name: Marcel Ogbonna-Amu Reference #: _____1498993 Entity Name: SOUTHGLEN, LLC Articles of Incorporation/Authorization to Transact Business Amendment ANY ISSUES, CALL Change of Agent MARCEL: FILE SECOND Reinstatement (518) 213 - 0826 Thank you! Conversion □ Merger Dissolution/Withdrawal Fictitious Name Other_____ Authorized Amount: \$125.00

Signature: Moncel og bowen-fram

F: +852.2682.9790

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.

Statutes.
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: SOUTHGLEN, INC
(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 FLORIDA
(Enter state, or if a non-U.S. entity, the name of the country)
on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: SOUTHGLEN, 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 14th day of October 2021 Signature of Authorized Representative of Limited Liability Company: Printed Name: <u>DAVID A. DELORENZO</u> Title: PRESIDENT Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature: Michael Delorenzo Printed Name: MICHAEL ANGELO DELORANZO Title: PRESIDENT Printed Name: ______ Title: Signature: _____ Printed Name: Title: Signature: _____ Printed Name: Signature: Signature: _____ Title: _____ Title: _____ If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator 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: Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00 Certified Copy: \$30.00 (Optional)

\$5.00 (Optional)

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Certificate of Status:

ARTICLES OF ORGANIZATION θf SOUTHGLEN, LLC

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The undersigned, for the purpose of forming a limited liability company under the Florida Revised Limited Liability Company Act. Florida Statutes. Chapter 605, hereby makes, acknowledges and files the following Articles of Organization.

ARTICLE I

NAME

The name of the limited liability company shall be Southglen, LLC (the "Company"). The mailing and street address of the principal office of the Company shall be 82 ½ Charlotte Street, Suite E. St. Augustine, Florida 32084.

ARTICLE II

PURPOSES AND POWERS

The general purpose for which this Company is organized is to transact any lawful business for which a limited liability company may be organized under the laws of the State of Florida. The Company shall have all the powers granted to a limited liability company under the laws of the State of Florida.

ARTICLE III

REGISTERED OFFICE AND AGENT

The name and street address of the registered agent in the State of Florida are Michael A. DeLorenzo, 82 1/2 Charlotte Street, Suite E, St. Augustine, Florida 32084.

ARTICLE IV

ADMISSION OF MEMBERS

No additional members shall be admitted to the Company except with the unanimous written consent of the members of the Company.

ARTICLE V

TERMINATION OF EXISTENCE

The Company shall not be dissolved upon the occurrence of any event that terminates the continued membership of a member in the Company, provided there is at least one remaining member. The Company shall be terminated and dissolved upon the consent of all of the members.

ARTICLE VI

MANAGER

The Company shall be managed by one or more managers and is, therefore, a manager-managed limited liability company. The managers shall be elected in the manner set forth in the Operating Agreement of the Company. The managers shall hold the offices and have the responsibilities accorded to them by the members as set forth in the Operating Agreement. The names and addresses of the managers shall be:

David A. DeLorenzo 82 ¹/₂ Charlotte Street, Suite E, St. Augustine, Florida 32084 Michael A. DeLorenzo 82 ¹/₂ Charlotte Street, Suite E St. Augustine, Florida 32084

ARTICLE VII

DURATION AND COMMENCEMENT

The Company shall exist perpetually. The Company's existence shall commence on the date these Articles of Organization are executed, except that if they are not filed by the Department of State of the State of Florida within five (5) business days thereafter, the Company's existence shall commence upon filing by the Department of State.

Remainder of Page Intentionally Blank - Signature Page Follows

IN WITNESS WHEREOF, the undersigned made and subscribed these Articles of Organization for the foregoing use and purpose this 14th day of October , 2021.

ord of

David A. Dellorenzo, as Authorized Representative

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of the Florida Statutes, Southglen, LLC, a Florida limited

liability company (the "Company"), submits the following statement in designating the

registered office/registered agent of the Company in the State of Florida:

1. The name of the Company is Southglen, LLC.

2. The name and address of the registered agent and office are Michael A.

DeLorenzo, 82 1/2 Charlotte Street, Suite E, St. Augustine, Florida 32084.

ACKNOWLEDGMENT:

Having been named as registered agent and to accept service of process for the 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 the Florida Revised Limited

Liability Company Act.

DATED: This 14thday of October 2021.

Michael Pelorenzo

Michael A. DeLorenzo, as Registered Agent

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