L21000461379

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





500374347635

10/21/21--01027--001 **180.00

2021 CT 21 1512:54

To: FL Secretary of State Corporation Division

Please find one Articles of Conversion and New Articles in order to domesticate:

Diamond Oasis LLC

Please find enclosed a check for \$150 for the certificate of conversion and the new articles of organization.

If there are any questions regarding this filing, please call Jessica Marschke at 1-800-981-7183 ext. 1267618

Please return all completed documents to:

Business Filings Incorporated Attn: Filing Department 8020 Excelsior Drive, Suite 200 Madison, WI 53717

Best Regards,

Filing Department Business Filings Incorporated

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.

Diamond Oasis LLC (Enter Name of O	ther Business Entity)		
2. The "Other Business Entity" is a LLC			
(Enter entity	type Example: corporation, limited partnership, artnership, common law or business (rust, etc.)		
First organized, formed or incorporated under	the laws of Illinois		
10/24/2019	(Enter state, or if a non-U.S. entity, the name of the country)		
(date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability C	Company as set forth in the attached Articles of Organization:		
Diamond Oasis LLC			
Diamond Oasis LLC (Enter Name of Florida Lin	mited Liability Company)		
(Enter Name of Florida Lin 4. If not effective on the date of filing, enter th (The effective date: 1) cannot be prior to da	ne effective date:ne effective date:ne effective days after the epartment of State: <u>AND</u> 2) must be the same as the effective		

Page 1 of 2

Signed this 11th day of October	20 2/
Signature of Authorized Representative of Limi	
Signature of Authorized Representative: Printed Name: Jeanlu Kramarik	Title: Member
Signature(s) on behalf of Other Business Entity:	•
Signature:	
Printed Name: Jeanlu Kramarik	Title: Member
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature: Printed Name:	
Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy. Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:

Diamond Oasis LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Maning Address:
1477 Via De La Palma	1477 Via De La Palma
Jupiter, Florida 33477	Jupiter, Florida 33477
	

ARTICLE III - Registered Agent, Registered Office. & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Plorida registration.)

The name and the Florida street address of the registered agent are:

Jeanlu Kramarik		
N	ame	
1477 Via De La Palm	a	
Florida street address (P.O. Box NOT acceptable)		
Jupiter	FL 33477	
City	Zip	

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)

Jeanlu Kramarik

(CONTINUED)

Page Lof 2

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 AMBR" Jeanlu Kramarik 1095 Military Trail, Unit 1805 Jupiter, Florida 33458 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: ______ (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **ARTICLE VI:** Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (In accordance with section 605,0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Jeanlu Kramarik 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)
- S 5.00 Certificate of Status (Optional)