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(Reque	stor's Name)
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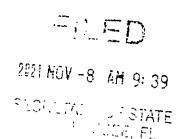
12905 SW 42 STREET Suite: 210 MIAMI, FL 33175 Phone: 305-444-4994

Email: filing@ecfsfiling.com

CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

(CORPORATE NAME	Investments Corp	CUMENT #)
2. (CORPORATE NAME) (DO	CUMENT #)
3. (CORPORATE NAME) (DO	CUMENT #)
	117/	\Box 1
		Certificate Of Status Other Filings
☐ Walk-In X P New Filings Profit	Amendments Amendments	Other Filings
New Filings	Amendments	
New Filings Profit	Amendments Amendments	Other Filings Annual Report
New Filings Profit Non-Profit	Amendments Amendments Resignation	Other Filings Annual Report Fictitious Name

Examiners Initials	



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: MBY INVESTMENTS CORP.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
07-05-2017 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: MBY INVESTMENTS 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 1	day of <u>NOVEMBER</u>	2021
Signature of Auth	orized Representative of Lim	ited Liability Company:
	Φ.	A
Signature of Author	orized Representative: 🗴 💍	slda Berchoff
Printed Name-BISC	HOFF, HILDA	Title: MANAGER
Signature(s) on be	half of Other Business Entity:	[See below for required signature(s)]
Simone XX	Ada Dien O. 201	Title: DIRECTOR
Printed Name: BISC	HOEE HILDA	THE DIRECTOR
Printed Name: 513C	HOFF, MILON U	1 Hile: DIRECTOR
Signature:		
Printed Name:		Title:
		_ `
Signature:		
Printed Name:		Title:
Signature:		
Drieted Manage		Title:
Frinted (vame:		1 KGE:
5		
Signature:		Title:
Printed Name:		Title:
Signature:		
Printed Name:		Title:
*		
If Florida Corpora	tion:	
	an, Vice Chairman, Director, or	Officer
If Directors on Office	ers have not been selected, an In	onica.
II Directors of Office	ers have not been selected, an in	corporator must sign,
	<u>.</u>	_
II Florida General	Partnership or Limited Liabili	ty Partnership:
Signature of one Ger	neral Partner.	
If Florida Limited	Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL (General Partners.	
All others:		
Signature of an auth	orized nerson	
orginature of all auth	orized person.	
Fees:		
	Conversion:	\$ 25.00
Fees for Flo	rida Articles of Organization:	\$125.00
Certified Co		\$30.00 (Optional)
Certificate o	• -	\$5.00 (Optional)
		T-1 (- p11-011-01)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		Y INVESTMENTS LLC	
	(Must contain the words "Li	imited Liability Company, "L.L.C.," or "LLC.")	 _
ARTICLE II	I - Address:	·	
The mailing a	iddress and street addres	ss of the principal office of the Limited Liab	pility Company is:
Principal Off	lice Address:	Mailing Address:	
4611 NW 74 A	ve	4611 NW 74 Ave	
		-011 1111 /4 AVG	
ARTICLE III	I - Registered Agent, F	MIAMI, FL 33166 Registered Office, & Registered Agent's S	ignature:
ARTICLE III (The Limited Liabi business entity wi	I - Registered Agent, Fility Company cannot serve as in the sective Florida registration	MIAMI, FL 33166 Registered Office, & Registered Agent's S	al or mother
ARTICLE III (The Limited Liabi business entity wi	I - Registered Agent, Fility Company cannot serve as in the sective Florida registration	MIAMI, FL 33166 Registered Office, & Registered Agent's S ts own Registered Agent. You must designate an individua L) ss of the registered agent are:	al or mother
ARTICLE III (The Limited Liabi business entity wi	I - Registered Agent, I lity Company cannot serve as i the an active Florida registration the Florida street addre	MIAMI, FL 33166 Registered Office, & Registered Agent's S ts own Registered Agent. You must designate an individual.) ss of the registered agent are:	al or mother
ARTICLE III (The Limited Liabi business entity wi	I - Registered Agent, I lity Company cannot serve as i the an active Florida registration the Florida street addre	MIAMI, FL 33166 Registered Office, & Registered Agent's S ts own Registered Agent. You must designate an individua L) ss of the registered agent are:	al or mother
ARTICLE III (The Limited Liabi business entity wi	I - Registered Agent, I filty Company cannot serve as i the an active Florida registration the Florida street addre BISCHOFF, HILDA 4611 NW 74 Ave	MIAMI, FL 33166 Registered Office, & Registered Agent's S ts own Registered Agent. You must designate an individua L) ss of the registered agent are:	al or mother 222 NOV -8

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)

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	BISCHOFF, HILDA
	4611 NW 74 Avo
	MIAMI, FL 33168
Use attachment if necessary)	
EV: Other provisions, if any.	
REQUIRED SIGNATURE:	
- Stilda	Birchery
	V(t)
	a authorized representative of a member ith section 505,0203 (1) (b), Florida Statutes, I am aware int to the Department of State constitutes a third degree for
	BISCHOFF, HILDA d or printed name of signee