122 WV010289

(Requestor's Name)
(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:

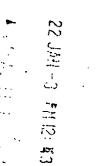
Office Use Only

T. SCOTTJAN 1 0 2022



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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: DBR Good Vibe Tribe LL	C	
SUBJECT:(Nan	ne of Resulting Florida Limite	d Company)
		n, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence cor	ncerning this matter to:	
Anna Manukyan		
(Contact Person	n)	
Legalinc Corporate Services Inc.		
(Firm/Compan	y)	
10601 Clarence Dr., Ste. 250		
(Address)		
Frisco, TX 75033		
(City, State and Zip	Code)	
FILINGS@LEGALINC.COM		
E-mail Address: (to be used for future a	nnual report notifications)	
For further information concerning t	this matter, please call:	
Anna Manukyan	at (⁸⁶⁶)	757-5850
(Name of Contact Person)		(Daytime Telephone Number)
Enclosed is a check for the following dollars and drawn on a bank located		ocessed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐\$155.00 Filing and Certificate of Status	-	
Mailing Address:		Street Address:
New Filing Section Division of Corporations		New Filing Section Division of Corporations
P.O. Box 6327		The Centre of Tallahassee
Tallahassee, FL 32314	2	2415 N. Monroe Street, Suite 810

INHS11 (7/17)

Tallahassee, FL 32303

<u>Articles of Conversion</u>

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: DBR Good Vibe Tribe 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
10/7/2021
10/7/2021 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
DBR Good Vibe Tribe 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 16 day of December	20 <u> 21</u>
	2011 12% C
Signature of Authorized Representative of Lim	
Signature of Authorized Representative:	raig Wehrenberg
Signature of Authorized Representative:Printed Name: Craig Wehrenberg	Title: Member
Times (tame. a s g s s s, m, g	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Craig Wehrenberg Signature: Printed Name: Craig Wehrenberg	
Signature:	
Printed Name: Craig Wehrenberg	Title: Member
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:Printed Name:	7° 1
Printed Name:	Title:
Signature: Printed Name:	F31.1
Printed Name:	Title:
7	
Signature:Printed Name:	Tides
rtinted Name:	Hue:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an In	
it breeks of officers have not occur selected, an in	confination must sign.
lf Florida General Partnership or Limited Liabili	ty Partnershin:
Signature of one General Partner.	
lf Florida Limited Partnership or Limited Liabili	ty 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)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:					
The name of the Limited Li	ability Company i	is:			
DBR Good Vibe Tribe LLC					
	he words "Limited Liab	ility Company, "L.L.C.," or "LLC.")	 		
ARTICLE II - Address: The mailing address and str	reet address of the	principal office of the Limited	d Liability Company is:		
Principal Office Address:		Mailing Address:			
2800 N Atlantic Ave #312		2800 N Atlantic Ave #312	2800 N Atlantic Ave #312		
Daytona Beach, FL 32118 US	S	Daytona Beach, FL 32118	us		
business entity with an active Florida S	da registration.) treet address of the NC CORPORATE S	SERVICES INC.	individual or another		
	Na	me			
		ONS BLVD, SUITE 400 O. Box NOT acceptable)			
FORT M	IYERS	FL ³³⁹⁰⁷			
	City	Zip			
liability company at th registered agent and agre statutes relating to the p	e place designated to act in this cap proper and complet	I to accept service of process for in this certificate, I hereby acc acity. I further agree to compl te performance of my duties, ar registered agent as provided fo	cept the appointment as ly with the provisions of al nd I am familiar with and		
		~	22		
Reg	gistered AgenCs.8	gnature (REQUIRED)	် ကို နှာ ကို သိ		
	(CONT)	INUED)	7		

ART	171	F	137	
AKI	IVI.	J CZ	1 V -	

The name and address of each person authorized to manage and control the Limited Liability Company:

"AMBR" = Authorized Member	
"MGR" = Manager	O S Make and
AMBR	Craig Wehrenberg
	2800 N Atlantic Ave #312
	Daytona Beach, FL 32118 US
	· · · · · · · · · · · · · · · · · · ·
	
CLE V: Other provisions, if any. REQUIRED SIGNATURE:	Craig Wehrenberg
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Craig Wehrenberg	

Filing Fees
Organization and Designation of Registered Agent

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)



▼HELLOSIGN

Audit Trail

TITLE	ibevest - LLC Move to Florida Signature Document
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FILE NAMEDBRGoodVibeTribeL...OTHERTOFL (1).pdfDOCUMENT ID4c2206f7bf63a9df156eceee4f167742ef2baef6

AUDIT TRAIL DATE FORMAT MM / DD / YYYY

STATUS • Completed

Document History

() SENT	12 / 16 / 2021 16:24:57 UTC	Sent for signature to Craig Wehrenberg (ashorethingdaytona@gmail.com) from josh@tribevest.com
•=		IP: 76.196.242.241
⊚	12 / 16 / 2021	Viewed by Craig Wehrenberg (ashorethingdaytona@gmail.com)
VIEWED	17:17:13 UTC	IP: 174.211.226.91
<u></u>	12 / 16 / 2021	Signed by Craig Wehrenberg (ashorethingdaytona@gmail.com)
SIGNED	17:19:07 UTC	IP: 174.211.226.91
\odot	12 / 16 / 2021	The document has been completed.
COMPLETED	17:19:07 UTC	