# 220000 1158

(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. SCOTT

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## **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: TEAM KUAI RACING LLC	
(Name of Resulting Florida Limi	ted Company)
The enclosed Articles of Conversion, Articles of Organizat Business Entity" into a "Florida Limited Liability Company	
Please return all correspondence concerning this matter to:	
JENNIFER CANESTRA	
(Contact Person)	-
QLEW GROUP LLC	
(Firm/Company)	_
336 BON AIR CENTER #394	_
(Address)	
GREENBRAE, CA 94904	
(City, State and Zip Code)	-
jennifer@qlewgroup.com	_
E-mail Address: (to be used for future annual report notifications)	
For further information concerning this matter, please call:	
Jennifer Canestra at ( 561	<sub>\</sub> 465-6210
(Name of Contact Person) (Area Code	) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks production of the United States)	processed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  \$\begin{array}{l} \$150.00 Filing Fees and Certificate of Status \end{array}  \$\begin{array}{l} \$180.00 Filing Fees and Certified Conversion & Status &	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

INHS11 (7/17)

WY

#### **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:
TEAM KUAI RACING 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.
(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)
02/22/2016 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:
TEAM KUAI RACING 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 29th day of December	20_21		
Signature of Authorized Representative of Limi	ted Liability Company:		
Signature of Authorized Representative:  Printed Name: Jennifer Canestra	Title: CFO		
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s)]		
Signature: Quality Ca			
Signature: Juff Co	Title: CFO		
Signature: Printed Name:	Title:		
£;			
Signature:Printed Name:	Title:		
Signature:Printed Name:	Title:		
Signature: Printed Name:	Title		
rtifiled (Name.			
Signature:			
Printed Name:	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: 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

ARTICLE I - Name: The name of the Limited Liability Company is:		
TEAM KUAI RACING LLC  (Must contain the words "Limited Liability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal of	fice of the Limited Liability Company is:	
Principal Office Address: Mailin	g Address:	
2889 McFarlane Rd, #2114 2889 M	cFarlane Rd, #2114	
	FL 33133	
(The Limited Liability Company cannot serve as its own Registered Agent. business entity with an active Florida registration.)  The name and the Florida street address of the registered  Northwest Registered Agent LLC  Name		
7901 4th St N, Suite 300		
Florida street address (P.O. Box NC	ddress (P.O. Box NOT acceptable)	
St. Petersburg FL <sup>3</sup>	3702	
City	Zip	
Having been named as registered agent and to accept so liability company at the place designated in this certification registered agent and agree to act in this capacity. I further statutes relating to the proper and complete performant accept the obligations of my position as registered agent.	ficate, I hereby accept the appointment as her agree to comply with the provisions of all ace of my duties, and I am familiar with and	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

A		E.	$IV_{-}$
4	K I I	. P.	1 V -

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	
MGR	DANIEL THIELMAN JR
	2889 McFarlane Rd, #2114
	Miami, FL 33133
(Use attachment if necessary)	
(000 41140111101101111111111111111111111	
CLE V: Other provisions, if any.	
522 Trouis, provisions, ir may.	
REQUIRED SIGNATURE:	
MEQUINED SIGNATURE.	
Out Alas	
7000	
Signature of a mambar or	r an authorized representative of a member
This document is executed in accordance	the with section 605.0203 (1) (b), Florida Statutes, I am aware that
any false information submitted in a doc	ument to the Department of State constitutes a third degree felor
as provided for in s.817.155, F.S.	, , , , , , , , , , , , , , , , , , ,
•	
JENNIFER CANESTRA	
T	yped 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) \$ 5.00 Certificate of Status (Optional)