# LJ2000019159

(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



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2022 JAN 18 AM 8: 25 SUCRETARY OF STATE SALLAHASSEE, FL

RECEIVED

TILED

,

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallbassos FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

Friotie: 630-336-1300
ACCOUNT NO. : 12000000195
REFERENCE : 412221 8269998
AUTHORIZATION: Synchologia
COST LIMIT : \$ 180.00
ORDER DATE : January 18, 2022
ORDER TIME : 2:08 PM
ORDER NO. : 412221-025
CUSTOMER NO: 8269998
DOMESTIC AMENDMENT FILING
NAME: CURT TECH GLOBAL, LLC
EFFECTIVE DATE:
XX ARTICLES OF CONVERSION AND ARTICLES OF ORGANIZATION RESTATED ARTICLES OF INCORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Alexxis Weiland -- EXT#

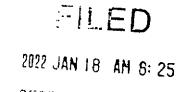
## **COVER LETTER**

Division of C				
SUBJECT: CURT T	ECH GLOBAL, LLC			
SOBJECT:	(Name of Res	sulting Florida Limit	ed Con	npany)
		_		d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:		
Meghan Davis				
	(Contact Person)		•	
Kluk Farber Law PLLC	;			
	(Firm/Company)			
166 Mercer Street, #6I	3			
	(Address)		-	
New York, NY 10012				
((	City, State and Zip Code)	<u> </u>		
meghan@klukfarber.c	om			
E-mail Address: (to b	e used for future annual re	port notifications)		
For further information	on concerning this ma	tter, please call:		
Meghan Davis		_at (_856	, 229-1	1291
(Name of Conta	ct Person)	(Area Code)	(Day	time Telephone Number)
	or the following amou a bank located in the		rocess	ed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	■\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add	ress:		Street	Address:
New Filing Se	ection		New F	Filing Section
Division of C				on of Corporations
P.O. Box 632	1		The C	entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



# Articles of Conversion For "Other Business Entity" Into

# SECRETARY OF STATE TALLAHASSEE, FL

#### 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: CURT TECH GLOBAL, 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)
10/22/2019
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
CURT TECH GLOBAL, 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 day of	_ 20_2_2
Signature of Authorized Representative of Limi	ted Liability Company:
	··
Signature of Authorized Representative:	- Jun
Printed Name: CURT CLEMENS	_ Title: SOLE MEMBER
Signature(s) on behalf of Other Business Entity: [	See helow for required signature(s
	per pelon for reducer significations
Signature: & & &	
Printed Name: CURT CLEMENS	Title: SOLE MEMBER
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title
Timed (value)	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
	<del> </del>
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnershin:
Signature of one General Partner.	<u>., </u>
- <del>G</del>	
<u>If Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All othors	
All others: Signature of an authorized person.	
organizate of all 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 1 - Name: The name of the Limited Liability Company is:			
CURT TECH GLOBAL, LLC (Must contain the words "Limited Liability	y Company, "L.1C.," or "LLC.")	_	
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability (	Company	is:
Principal Office Address:	Mailing Address:		
757 SE 17th Street, Suite 896 Ft. Lauderdale, FL 33316	757 SE 17th Street, Suite 896 Ft. Lauderdale, FL 33316	_ _	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the r	ered Agent. You must designate an individual or an egistered agent are:	nother O	2022 JAN 18 AM 8: 25
Name		E. A.	8
1201 Hays Street Florida street address (P.O	. Box NOT acceptable)	METARY OF ST	AN 8: 7
Tallahassee	FL 32301	L'ATE	, <sub>1</sub> %
City	Zip		
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p	this certificate. I hereby accept the appity. I further agree to comply with the poerformance of my duties, and I am fami	ointment a rovisions o iliar with a	as of all and

Registered Agent's Signature (REQUIRED)

(CONTINUED)

	DT		т.	137
Δ	RT	IC 1		IV-

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

AMBR" = Authorized Member		
MGR" = Manager		
AMBR	CURT CLEMENS	<del>_</del>
	757 SE 17th Street, Suite 896	
	Ft. Lauderdale, FL 33316	<del></del>
	·	
<del></del>		
		<u> </u>
<del></del>		— 芋
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		<u> </u>
Use attachment if necessary)		TALLAHASSEE, FL
Ose attachment if necessary)		۲
E V: Other provisions, if any.		
L V. Other provisions, it may.		
		•
POUDED SIGNATURE.		
<u>(EQUIKED</u> SIGNATUKE:		
CEQUIRED SIGNATURE:		
REQUIRED SIGNATURE:		

CURT CLEMENS \_\_\_\_

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) \$ 5.00 Certificate of Status (Optional)