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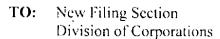


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COVER LETTER



SUBJECT: ELLIOTT SHRINK WRAP, LLC



The enclosed Articles of Conversion. Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

RICARDO D ELLIOTT	-			
	(Contact Person)		-	
ELLIOTT SHRINK WE	RAP, LLC			
	(Firm/Company)		-	
1751 NW 46TH AVE APT # C-302 (Address)				
		-		
LAUDERHILL, FL. 333	313			
(City, State and Zip Code)	.	•	
ricardoelliott@hotmail.	com			
E-mail Address: (to b	e used for future annual re	port notifications)	-	
For further informati	on concerning this ma	tter, please call:		
RICARDO ELLIOTT		at (⁹⁵⁴	\326-:	2969
(Name of Conta	act Person)		(Day	ytime Telephone Number)
Enclosed is a check t dollars and drawn on	or the following amou a bank located in the	int: (All checks p United States)	roces:	sed 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 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

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 Article ELLIOT SHRINK WRAP, LLC	es of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, commor	n 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)
JANUARY 08, 2021 on .	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Artic	eles of Organization:
ELLIOTT SHRINK WRAP,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 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 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.	
 The "Converted or Other Business Entity" has agreed to pay any members having appraisa which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. 	al rights the amount to
	9 8 2 2
	ED 1

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:		
The name of the Limited Liability Compa	iny is:	
ELLIOTT SHRINK WRAP, 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 office of the Limite	d Liability Company is:
Principal Office Address:	Mailing Address:	
1751 NW 46TH AVE	1751 NW 46TH AVE	
APT # C-302	APT # C-302	
LAUDERHILL, FL 33313	LAUDERHILL, FL 33313	
The name and the Florida street address o		
	Name	
1751 NW 46TH AVE AF		
Florida street address	(P.O. Box <u>NOT</u> acceptable)	
LAUDERHILL	FL 33313	
City	Zip	
Having been named as registered agent liability company at the place designaregistered agent and agree to act in this estatutes relating to the proper and compacted the obligations of my position Registered Agent is	ited in this certificate. I hereby acc capacity. I further agree to compl plete performance of my duties, an	cept the appointment as ly with the provisions of all ad I am familiar with and
(CO:	NTINUED)	

ARTICLE IV-

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

Name and Address:		
RICARDO D ELLIOTT 1751 NW 46TH AVE APT # C-302 LAUDERHILL, FL 33313		

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, 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.

RICARDO D ELLIOTT

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)

Signed this 26 day of JANUARY, 2022				
Signature of Authorized Representative of Limited Liability Company:				
Signature of Authorized Representative: Printed Name: RICARDO D ELLIOTT	Title: AMBR			
Signature(s) on behalfjof Other Business Entity:	[See below for required signature(s)]			
Signature: Printed Name: RICARDO D ELLIOTT	_ Title: AMBR			
Signature:				
Signature:Printed Name:	Title:			
Signature:Printed Name:	Title			
Signature: Printed Name:	_ Title:			
Signature:				
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)			