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COVER LETTER

TO: New Filing Section Division of Corpo				
SUBJECT:	De Luxe	Publis	<u> hin</u>	Co.
	(Name of Resul	ting Florida Limited	a Company	ע
				es are submitted to convert an "Other lance with s. 605.1045, F.S.
Please return all correspo	ndence concerning	this matter to:		
Ti-ffany The	ontact Person)			
<u>Deluxe Pu</u>	Blacking (irm/Company)			
4768 wood	Ville high	nuay_		
Tallahassee, (City.	Floyida 3 State and Zip Code)	32305		
Publishing of E-mail Address: (to be use	el UXE Sadg d for future annual repo)	
For further information c	oncerning this matte	er, please call:		
Tiffany The	rson)	at (<u>678</u>) (Area Code)	(Daytime	Telephone Number)
Enclosed is a check for the dollars and drawn on a ba			ocessed b	y this office must be payable in US
	Gertificate of	□S180.00 Filing F and Certified Copy	Cer	\$185.00 Filing Fees, raified Copy, and raificate of Status
Mailing Address New Filing Section Division of Corporation P.O. Box 6327 Tallahassee, FL 3	on prations	7 I T	The Centre	

Tallahassee, FL 32303

INHS11 (7/17)

ED

Articles of Conversion

For

2077 H'R 23 AM H: 45

"Other Business Entity"

Into

LWRY OF STATE ... LAHASSEE, FL

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization 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: Deluxe Publishing Co. P22.00018947	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Deluxe Publishing (Enter entity type, Example: corporation, limited partnership, general partnership, common law or business trust, e	itc.
First organized, formed or incorporated under the laws of Floricla (Enter state, or if a non-U.S. entity, the name of the country)	
on March 14, 2022 (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization	n:
Deluxe Publishing Le.	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: March 23,2022	
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after	er
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 which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	to

Signed this	_20 <i>2</i> _2		
Signature of Authorized Representative of Limit	·-		
Signature of Authorized Representative: That Printed Name: Ti Ffany Thompson	Thompson Title: Owner		
Signature(s) on behalf of Other Business Entity: [S			
Signature: Than Thompson Printed Name: Vi Hany Thompson			
Signature:Printed Name:	Title:		
Signature:Printed Name:	_Title:		
Signature: Printed Name:	_ Title:		
Signature:Printed Name:	_ Title:		
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:

(Must contain the words "Limited Liability Company, "J.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	:
Principal Office Address: Mailing Address:	
4768 woodville highway Tallahassee Fiorida 123.05 Tallahassee Florida 32305	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
The name and the Florida street address of the registered agent are:	
The name and the Florida street address of the registered agent are: Tiffany. Thompson Name Tage Name	C
Florida street address (P.O. Box NOT acceptable)	
Tallahossee FL 32305 City Zip	
Having been named as registered agent and to accept service of process for the above stated limits	ed

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.

(CONTINUED)

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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 AMBR	Tiffany Thompson 4768 woodvilk highway #512 Tallahassor, Florida 32305			
MGRI	Andre Milford 4768 woodville highwy#512 Tallahrissee, Florida 32305			
MGR	Jordan Thompson 1768 woodville nighway #512 Tallahorsee, Florida 32305			
MGRI	Paulene Thompson 47/20 wardville highway #3/2 Tallahassee, Florida 323053			
(Use attachment if necessary)	ZHAR 23			
ARTICLE V: Other provisions, if any.	3 AM III:			
REQUIRED SIGNATURE:				
Tefan	Thompson			
This document is executed in accordance	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes, I am aware that ment to the Department of State constitutes a third degree felony			
Tiff	any Thompson			
Ty Ty	Typed or printed name of signee			
	Filing Fees			
\$125.00 Filing Fee for Articles o	of Organization and Designation of Registered Agent			

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