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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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S. CHATHAM

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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 17, 2022

VYACHESLAV CHAGEYEU 4873 PALM COAST PKWY N.W. STE 4 PALM COAST, FL 32137

SUBJECT: LUMA UNLIMITED CO. LLC

Ref. Number: W22000035079

We have received your document for LUMA UNLIMITED CO. LLC and check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form that was submited seems to be the wrong form. An LLC can only convert into a Florida entity, they cannot domesticate.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any further questions concerning your document, please call (850) 245-6052.

Summer Chatham Regulatory Specialist II New Filing Section

Letter Number: 022A00006366

RECEIVED

1022 APR -5 AM 6: LS

1059 CRATIONS

1059 CRATIONS

22 APR -5 AM 8:50 SECRETARY OF STATE

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Luma Unlimited Co LLC (Name of Resulting Florida Limited Company)
(Name of Resulting Piorida Limited Company)
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:
Vyacheslav Chageyev (Contact Person) Luma Unlimited Co (Firm/Company) 4873 Palm Coast Pkwy, NW, Ste H (Address) Palm Coast, FL 32/37 (City. State and Zip Code)
PROM Strax Q gmail. Com E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Vyaches la v Chage ye Vat (386) 503 - 0358 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office mest be payable in US dollars and drawn on a bank located in the United States)
S150.00 Filing Fees (S25 for Conversion & S155.00 Filing Fees and Certified Copy & Certified Copy, and & S125 for Articles of Organization)
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32303

Articles of Conversion

For

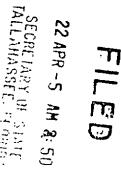
"Other Business Entity"

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 Articles of Conversion is:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORGOPTON (Enter entity type. Example: corporation, mitted partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
On O8/20/2020 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Luma Unlimited CO 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	
Signat	ure of Authori	zed Representative	of Limit	ed Liability Company:	
Signatu Printed	ire of Authorize Name: <u>Vyac</u>	ed Representative: _ heslav Chageyev	Chage	Title: Owner	
Signatu	ure(s) on behalf	f of Other Business	Entity: S	See below for required signature(s)]	
Signatu Printed	ire: Name: <u>Vyachesla</u>	Chagsi av Chageyev	yev	Title: Owner	
Signatu Printed	ire: Name:			_ Title:	
				Title:	
Signatu Printed	ire: Name:		******	_ Title:	
Signatu Printed	ire: Name:			_ Title:	
Signatu Printed	ire; Name;			Title:	
Signatu		n: , Vice Chairman, Dire have not been selecte			
	ida General Pa ire of one Gener	rtnership or Limited al Partner.	d Liabilit	y Partnership:	
	ida Limited Pa ires of ALL Gei		d Liability	y Limited Partnership:	
All oth Signatu	ers: ire of an authori	zed person.			
Fees:					
	Articles of Cor Fees for Florid Certified Copy Certificate of S	la Articles of Organi	zation:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

22 APR -5 AM 8:50

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Αl	₹T	IC	LE	[-	Na	me
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The name of the Limited Liability Company is:

Luma Unlimited Co LLC
(Must contain the words "Limited Liability Company, "L.L.C.," or "L.L.C.,"

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
4873 Palm Coast Pewy NW	4873 Palm Coast Pkwy NW
Ste 4	Ste 4
Palm Coast, FL 32/37	Palm Coast, FL 32/37

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:

Vycheslav Chageyev

Name

47 Edith Pope De.

Florida street address (P.O. Box NOT acceptable)

Palm Coast, FL 32/64

City Zip

Having been named as registered agent and to accept service of process for the above stated limited 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Vyarieslav Chageyev 47 Edith Pape DR Palm Coast, 1FL 32164
(Use attachment if necessary)	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
	an authorized representative of a member
This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felor
This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felor
This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Vyaches lav Ty \$125.00 Filing Fee for Articles of	with section 605.0203 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree felor ped or printed name of signee Filing Fees of Organization and Designation of Registered A
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