# L22000187842

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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J DERINIS MAY - 6 2022

#### COVER LETTER

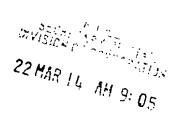
<b>TO:</b> New Filing S Division of C					
	•				
SUBJECT: Navrae,	(Name of Res	ulting	Florida Limite	ed Con	ipany)
			_		d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this	matter to:		
Kenton Hubner					
	(Contact Person)				
Navrae, LLC					
	(Firm/Company)				
2210 S Tamiami Trl S	uite 5				
	(Address)				
Venice, FL 34293					
	City, State and Zip Code)				
kent.hubner@navrae.	com; don.schwaderer@r	navrae	e.com		
E-mail Address: (to b	pe used for future annual re	port n	otifications)		
For further informati	on concerning this ma	tter. p	olease call:		
Kenton Hubner		at (	254	424-	3957
(Name of Cont	act Person)	`	(Area Code)	(Day	time Telephone Number)
	for the following amou a bank located in the			rocess	sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status		180.00 Filing Certified Cop		S185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add New Filing S Division of C P.O. Box 632	ection Corporations		: ; [	New I Divisi	t Address: Filing Section on of Corporations Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## 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: NAVRAE, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Foreign Entity  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
on C2D-ADC (date of organization, formation or incorporation).  3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Navrae, 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 1 day of February	_20 <u>0000</u>
Signature of Authorized Representative of Limit	
	N/
Signature of Authorized Representative:	1/1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
Printed Name: Kenton Hubner	Title: COO
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s)
Signature 6	Title: CEO
Signature: Mun Bolish	
Printed Name: Aaron Schwaderer	Title: CMO
Printed Name: Adioi Schwaderer	Title.
Signature:	
Printed Name:	Title:
Frinted Name.	
Signature:	
Printed Name:	Title:
T Tilled Tilling	
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 Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
_	
<u>Fees:</u>	
	\$25 AA
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

 $\mathcal{A}_{i}^{k} = \{ i, k \in \mathbb{N} \mid i \in \mathcal{I}_{k} = 0 \}$ 

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE 1 - !			
The name of the	Limited Liability Comp	pany is:	
Navrae, LLC			
	(Must contain the words "Limite	ed Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - The mailing add		of the principal office of the Limited L	iability Company is:
Principal Offic	e Address:	Mailing Address:	
2210 S Tamiami	Trl	2210 S Tamiami Trl	
Suite 5		Suite 5	
Venice, FL 3429	3	Venice, FL 34293	
business entity with	an active Florida registration.)	wn Registered Agent. You must designate an indiv of the registered agent are:	All the second s
	Don Schwaderer		
		Name	
	13591 Esposito ST		
	<del></del>	rss (P.O. Box NOT acceptable)	
	Venice	FL <sup>34293</sup>	
	City	Zip	
liability co registered ago statutes rela	mpany at the place designent and agree to act in thiting to the proper and conobligations of my position	nt and to accept service of process for the nated in this certificate. I hereby accept is capacity. I further agree to comply with mplete performance of my duties, and I on as registered agent as provided for in	the appointment as ith the provisions of all am familiar with and
		nt's Signature (REQUIRED)  ONTINUED)	22 MAR 14 AM 9: 05

#### ARTICLE IV-

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

Name and Address:
Des Calemadassa
Don Schwaderer
13591 Esposito St
Venice, FL 34293
Kenton Hubner
1495 Overbrook Rd
Englewood, FL 34293
Aaron Schwaderer
128 Chambers Creek Cir
Maypearl, TX 76064
_ <del></del>
an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware to the Department of State constitutes a third degree fel

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)