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PICK-UP	WAIT	MAIL
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Certified Copies	Certificate	s of Status
Special Instructions to Filin	ng Officer:	
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Office Use Only

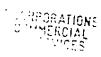
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2622 KAY 20 PM II: 00

FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED 2022 HAY 20 PM 2: 43



May 12, 2022

ASSAF BEN SHIMOL 3017 GREENE ST HOLLYWOOD, FL 33020 US

SUBJECT: HPL WHOLESALE INC Ref. Number: W22000060900

5022 H.Y. 20 PH II: 00 kg is

We have received your document for HPL WHOLESALE INC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

The registered agent must sign accepting the designation.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Coates Brianna Regulatory Specialists II

Letter Number: 522A00010923

COVER LETTER

Division of Corporations					
SUBJECT: HPL Wholesale Inc					
	Resulting Florida Lim	ited Con	npany)		
The enclosed Articles of Conversion, Art Business Entity" into a "Florida Limited					
Please return all correspondence concern	ing this matter to:				
Asssaf Ben Shimol					
(Contact Person)		_			
(Firm/Company) 3017 Greene st		_			202
(Address)		_		. *	375
Hollywood, FL 33020					76 ED
(City, State and Zip Code Assaf@hempprivatelabs.com)	_		 :,	FILED MAY 20 PHII: 00
E-mail Address: (to be used for future annual	report notifications)	_			00
For further information concerning this n	natter, please call:			•	
Assaf Ben Shimol	at (⁷⁰²	9648	730		
(Name of Contact Person)		(Day	time Telephone Num	iber)	
Enclosed is a check for the following amodollars and drawn on a bank located in the		process	sed by this office r	must be pay	able in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) □ \$155.00 Filing Fees and Certificate of Status	s S180.00 Filing and Certified Co	_	□\$185.00 Filing F Certified Copy, and Certificate of Status	d	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		New I Divisi The C	t Address: Filing Section ion of Corporation lentre of Tallahass N. Monroe Street,	see	

Tallahassee, FL 32303

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Articles of Conversion

For

"Other Business Entity"

Into

Fforida 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: HPL Wholesale Inc
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
March 07, 2022
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: HPL Wholesale 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.

20221/34/20 PHTI: 00

Signed this 13 day of April	_ 20 <u>22</u>	
Signature of Authorized Representative of Limit	ited Liability Company:	
Signature of Authorized Representative: Printed Name: Assaf Ben Shima	Title: President	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s))
Signature: ASSAF Ben Shi Mol	_Title: Owner	
Signature:Printed Name:	Title:	
Signature:Printed Name:		
Signature:Printed Name:		
Signature:Printed Name:	Title:	<u></u>
Signature: Printed Name:	_ Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.		
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	ty Limited Partnership:	202
All others: Signature of an authorized person.		20 PM II: 00
<u>Fees:</u>) PM
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	H: 00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

HPL Wholesale L			
1	Must contain the words "Limited Li	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - A The mailing add		ne principal office of the Limit	ed Liability Company is:
Principal Office	Address:	Mailing Address:	
3017 Greene st	3017 Greene st 3017 Greene st		
Hollywood, FL 330	020	Hollywood, FL 33020	
	Masters Accounting Services Inc Name 6797 Main Steet Florida street address (P.O. Box NOT acceptable)		022 MAY 20 PH 11: 00
	Miami Lakes	FL 33014	
	City	Zip	
liability con registered ager statutes relat.	npany at the place designate it and agree to act in this co ing to the proper and comp	nd to accept service of process ed in this certificate. I hereby a apacity. I further agree to com- lete performance of my duties, a ex-registered agent as provided	ecept the appointment as ply with the provisions of a and I am familiar with and

(CONTINUED)

		*** * 1	 	
•	IJ		 4 6.	IV-
	T.		 4 . F	

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
	· · · · · · · · · · · · · · · · · · ·	
		21
		2022
(Use attachment if necessary)		20
		PH ED
RTICLE V: Other provisions, if any.		
		11: 00
		; i o
REQUIRED SIGNATURE:	\wedge	
REQUIRED SIGNATURE:	Atello	
	1	

Signature of a member or an authorized representative of a member

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.

Filing Fees

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