

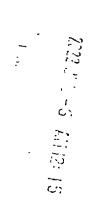
(Requestor's Name)					
(Address)					
(Address)					
(nudicos)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
W2200081342					
Waxuur, 342					

Office Use Only



900387107209

# U5/17/28--81005





### FLORIDA DEPARTMENT OF STATE Division of Corporations

2022 CL - 6 AH 10: 3

June 15, 2022

KEANU HU 2150 N BAYSHORE DR APT 2309 MIAMI, FL 33137

SUBJECT: REFULGENT UNRAVEL LLC

Ref. Number: W22000081362

Signe a

We have received your document for REFULGENT UNRAVEL LLC and your check(s) totaling \$155.00. 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.

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.

Karen Lovelace Regulatory Specialist II

Letter Number: 122A00013436

### COVER LETTER

TO:	New Filing S Division of C					
CHIRI	REFULC	SENT UNRAVEL LLC				
audo	тст	(Name of Res	sulting Florida Li	mited Cor	npany)	
The e Busin	nclosed Article ess Entity" into	es of Conversion, Artic o a "Florida Limited Li	les of Organiz lability Compa	ation, ar my" in a	nd fees are submitted to con ecordance with s. 605,1045	vert an "Other , F.S.
Please	return all corr	espondence concernin	g this matter t	():		
KEAN	U HU					
		(Contact Person)				
		(Firm/Company)				
2150	N BAYSHORE C	PR. APT 2309				
		(Address)				
MIAMI	. FL 33137					
keanu	1hu@gmail.com	City, State and Zip Code)				
E-n	nail Address: (to b	be used for future annual re	port notifications	<u>,)</u>		
For fu	rther informati	on concerning this ma	tter, please cai	11:		
KEAN	J HU		_at (	,255-	3268	
	(Name of Conti	ict Person)	(Area Co	de) (Day	rtime Telephone Number)	
		or the following amou			sed by this office must be p	ayable in US
(\$25 for & \$125	),00 Filing Fees r Conversion for Articles nization)	#\$155,00 Filing Fees and Certificate of Status  Florida Deportalent	□\$180.00 Fil and Certified C		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
	Mailing Add	1 (55.	<i>ਦ</i> ਾ		t Address:	
New Filing Section					Filing Section	·
Division of Corporations					ion of Corporations 'entre of Tallahassee	
	P.O. Box 632 Tallahassee, I				N. Monroe Street, Suite 810	0
	rananassee. 1	1/=.'17			hassee, FL 32303	

### Articles of Conversion

For

### "Other Business Entity"

Into

## 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.

Signed this 12th day of MAY	<u> 20 A &amp; .</u>
Signature of Authorized Representative of Lim	ited Liability Company:
enginature of Authorized Representative of Emi-	12
Signature of Authorized Representative:	Can of
Signature of Authorized Representative: Printed Name: KEANU HU	Title: MANAGING PARTNER
Signature(s) on behalf of Other Business Entity:	
Signature: Printed Name: Keanu H.	· 
Deint of Names	Title Day S. day t
Timed Name. Read of 10	
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Test 1
Printed Name:	Title:
Chinatown	
Signature:Printed Name:	Title:
Trimed Name.	
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
<u>If Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of ALL General Partners.	tv minute in the control of the cont
organica or <u>resear</u> trementary arms.	
All others:	
Signature of an authorized person.	
<u>Fees:</u>	
	that so were
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30,00 (Optional)
Certificate of Status:	\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

REFULGENT UNF	BAVEL LLC			
		lity Company, "L.L.C.," or "L.L.C.,")		
ARTICLE II - A	Address:			
The mailing address	ess and street address of the	principal office of the Limited Liability Company		
Principal Office	Address:	Mailing Address:		
2150 N RAYSHORE DR		2150 N BAYSHORE DR		
2150 N BAYSHOR	YE UK			
2150 N BAYSHOR APT 2309	IE UK	APT 2309		
APT 2309 MIAMI, FL 33137  ARTICLE III - I (The Limited Liability)	Registered Agent, Registe	APT 2309  MIAMI, FL 33137  ed Office, & Registered Agent's Signature: distered Agent. You must designate an individual or another		
APT 2309 MIAMI, FL 33137  ARTICLE III - I (The Limited Liability business entity with an	Registered Agent, Registe Company cannot serve as its own R n active Florida registration.) & Florida street address of th	ed Office, & Registered Agent's Signature: distered Agent. You must designate an individual or another		
APT 2309 MIAMI, FL 33137  ARTICLE III - I (The Limited Liability business entity with an	Registered Agent, Registe Company cannot serve as its own R n active Florida registration.) e Florida street address of th KEANU HU	ed Office, & Registered Agent's Signature: distered Agent. You must designate an individual or another		
APT 2309 MIAMI, FL 33137  ARTICLE III - I (The Limited Liability business entity with an	Registered Agent, Registe Company cannot serve as its own R n active Florida registration.) e Florida street address of th KEANU HU	ed Office, & Registered Agent's Signature: distered Agent. You must designate an individual or another de registered agent are:		
APT 2309 MIAMI, FL 33137  ARTICLE III - I (The Limited Liability business entity with an	Registered Agent, Registe Company cannot serve as its own R n active Florida registration.) c Florida street address of the KEANU HU No. 2150 N BAYSHORE DR. A	ed Office, & Registered Agent's Signature: distered Agent. You must designate an individual or another de registered agent are:		
APT 2309 MIAMI, FL 33137  ARTICLE III - I (The Limited Liability business entity with an	Registered Agent, Registe Company cannot serve as its own R n active Florida registration.) c Florida street address of the KEANU HU No. 2150 N BAYSHORE DR. A	MIAMI, FL 33137  ed Office, & Registered Agent's Signature: eistered Agent. You must designate an individual or another registered agent are:  PT 2309		

:d yyaccept the obligations of my position as registered ageny as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

#### ARTICLE IV-

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	IZE ANULUSU
MGR	KEANU HU 2150 N BAYSHORE DR, APT 2309
	MIAMI, FL 33137
	MIAIMI, I L 33137
<del></del>	
	4977-74
(Use attachment if necessary)	
ARTICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
	14
This document is executed in accordance wany false information submitted in a document as provided for in \$ 817,155, F.S.	n authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, I am aware that ent to the Department of State constitutes a third degree felony
Kea	and Hu ed or printed name of signee
Type	ed 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)

Corporations Section P.O.Box 13697<sup>-</sup> Austin, Texas 78711-3697



## Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document. Certificate of Formation for REFULGENT UNRAVEL LLC (file number 803160467), a Domestic Limited Liability Company (LLC), was filed in this office on November 07, 2018.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on April 07, 2022.



John B. Scott Secretary of State

Come visit us on the internet at https://www.sos.texas.gov/ Fax: (512) 463-5709 TID: 10264

Dial 7-1-1 for Relay Services Document: 1137519930004