1220W331678

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

Office Use Only

T. SCOTT, JUL 2 8 2022



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CASAG HONOR VIDEO
DIVISION OF CORPORATIONS

COVER LETTER

| TO: New Filing Section Division of Corporations | |
|---|------------------------------------|
| EL COCO INTERNATIONAL LLC | |
| SUBJECT: (Name of Resulting Florida Li | imited Company) |
| The enclosed Articles of Conversion. Articles of Organiz Business Entity" into a "Florida Limited Liability Compa | |
| Please return all correspondence concerning this matter t | 0: |
| Jessica King | |
| (Contact Person) | |
| King's Tax Service | |
| (Firm Company) | |
| 11 Enterprise Rd #21 | |
| (Address) | |
| Hyannis, MA 02601 | |
| (City, State and Zip Code) | <u>—</u> |
| jessk@kingstaxes.com | |
| E-mail Address: (to be used for future annual report notifications | <u>s)</u> |
| For further information concerning this matter, please ca | |
| (Name of Contact Person) at (Area Co | de) (Daytime Telephone Number) |
| | |
| Enclosed is a check for the following amount: (All check dollars and drawn on a bank located in the United States) | |
| ☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing Fees and Certified (\$25 for Articles of Organization) ☐ \$180.00 Filing Fees and Certified (\$25 for Articles of Organization) | |
| Mailing Address: New Filing Section | Street Address: New Filing Section |
| Division of Corporations | Division of Corporations |
| P.O. Box 6327 | The Centre of Tallahassee |
| Tallahassee, FL 32314 | 2415 N. Monroe Street, Suite 810 |

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: EL COCO INTERNATIONAL LLC | |
|--|------|
| (Enter Name of Other Business Entity) | |
| 2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, e | _ |
| (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, e | .c.) |
| First organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the name of the country) | |
| (Enter state, or if a non-U.S, entity, the name of the country) | |
| MARCH 22, 2013 | |
| (date of organization, formation or incorporation) | |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization | 1: |
| EL COCO INTERNATIONAL 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 | r |
| 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 | 0 |

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.



| Signed this 15 day of July | _ 20_ <i>3.</i> 2 |
|--|-------------------------------------|
| Signature of Authorized Representative of Limi | |
| ot a CA d i ID accordation | ////// |
| Signature of Authorized Representative: Printed Name: VIKTORIYAKELLOYAN | Title: MANAGING MEMBER |
| Printed Name: VIKTORITARELLOTAN | Title: MAIVOING MEMBER |
| Signature(s) on behalf of Other Business Entity: | See below for required signature(s) |
| · | |
| Signature:Printed Name: GEORGE KELLOYAN | |
| Printed Name: GEORGE KELLOYAN | Title: MANAGER |
| | |
| Printed Name: | Title |
| rtifiled Name. | |
| Signature:Printed Name: | |
| Printed Name: | Title: |
| 0. | |
| Signature:Printed Name: | Tids |
| Printed Name: | |
| Signature: | |
| Signature:Printed Name: | Title: |
| | |
| Signature:Printed Name: | m'al |
| Printed Name: | Thie: |
| If Florida Corporation: | |
| Signature of Chairman, Vice Chairman, Director, or | Officer. |
| If Directors or Officers have not been selected, an In | corporator must sign. |
| | A. Danta and a |
| If Florida General Partnership or Limited Liabili Signature of one General Partner. | ty Partnersmp: |
| Signature of one General Latinet. | |
| <u>If Florida Limited Partnership or Limited Liabili</u> | ty Limited Partnership: |
| Signatures of ALL General Partners. | |
| | |
| All others: | |
| Signature of an authorized person. | |
| Fees: | |
| 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

| ARTICLE 1 - Name: The name of the Limited Liability Company | is: | |
|---|--|--|
| EL COCO INTERNATIONAL LLC | | |
| (Must contain the words "Limited Liab | ility Company, "L.L.C.," or "LLC." | } |
| ARTICLE II - Address: The mailing address and street address of the | principal office of the Lim | ited Liability Company is: |
| Principal Office Address: | Mailing Address: | |
| 510 CAROLINE DR | 510 CAROLINE DR | |
| VERO BEACH, FL 32968 | VERO BEACH, FL 3296 | |
| business entity with an active Florida registration.) The name and the Florida street address of th VIKTORIYA KELLOYAN | e registered agent are: | |
| | me | |
| 510 CAROLINE DR | | |
| Florida street address (P | O. Box NOT acceptable) | |
| VERO BEACH | FL 32968 | |
| City | Zip | |
| Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as Registered Agent's S | Lin this certificate, I hereby pacity. I further agree to con te performance of my duties. | accept the appointment as uply with the provisions of all and I am familiar with and |
| (CONT | INUED) | JUL 19 PH |

| ARTICLE IV- | |
|--|---|
| The name and address of each person authorized to manage and control the Limited Liability | 1 |
| Company: | |

| O A A A TO TO CO. A color of the color of th | |
|--|---|
| "AMBR" = Authorized Member | |
| "MGR" = Manager | |
| MGR | VIKTORIYA KELLOYAN |
| | 510 CAROLINE DR |
| | VERO BEACH, FL 32968 |
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| (Use attachment if necessary) | |
| (Use attachment if necessary) | |
| (Use attachment if necessary) LE V: Other provisions, if any. | |
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| | |
| LE V: Other provisions, if any. | |
| | |
| LE V: Other provisions, if any. | Mark |
| LE V: Other provisions, if any. | Mel |
| LE V: Other provisions, if any. REQUIRED SIGNATURE: | Mel |
| LE V: Other provisions, if any. REQUIRED SIGNATURE: | an authorized representative of a member |
| REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance | e with section 605,0203 (1) (b), Florida Statutes. I am aware th |
| REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document in a docum | e with section 605,0203 (1) (b), Florida Statutes, I am aware th |
| REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any talse information submitted in a document as provided for in s.817.155, F.S. | we with section 605,0203 (1) (b). Florida Statutes. I am aware the timent to the Department of State constitutes a third degree felo |
| REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any talse information submitted in a document as provided for in s.817.155, F.S. | we with section 605,0203 (1) (b). Florida Statutes, I am aware the ument to the Department of State constitutes a third degree felo |
| REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any talse information submitted in a document as provided for in s.817.155, F.S. | e with section 605,0203 (1) (b), Florida Statutes. I am aware th |
| REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any talse information submitted in a document is a provided for in s.817.155, F.S. Victorija | yped or printed name of signee Filing Fees |
| REQUIRED SIGNATURE: Signature of a member or This document is executed in a document 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 the timent to the Department of State constitutes a third degree felocytes by the section of the Department of Signee |