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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Moder Times Van Co W (Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Othe Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Shelby Westail (Contact Person)
Modern Times Van CD LLC (Firm/Company)
14605 49th St N, Unit 21 (Address)
(Lachades, FL, 33762 (City. State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
(Name of Contact Person) at (860 818 2470 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
■ \$150.00 Filing Fees (\$25 for Conversion and Certificate of Status of Organization) □\$155.00 Filing Fees □\$180.00 Filing Fees and Certified Copy Certified Copy Certificate of Status
Mailing Address:Street Address:New Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The 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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>limited liability Company</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of <u>California</u> (Enter state, or if a non-U.S. entity, the name of the country)
on 112812022 [date of organization, formation or incorporation]
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Modern Times Van Co UC (Enter Name of Florida Limited Liability Company)
(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.
abedinent's effective date on the Department of State 3 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.
yes.

o:	ited Liability Company:
Signature of Authorized Representative: Swallow Westand	Title: Owner
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Soon Chen	
Printed Name: Steven Otero-Radriguez	Title: Owner
Signature: 8000 VV	
Signature: 800 000 Printed Name: Shelloy Westarl	Title: <u>owner</u>
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:Printed Name:	A Section of the sect
Printed Name:	Title:
Signature: Printed Name:	Title: Title: Title: Title:
Printed Name:	_ Title: Q
11 Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In-	
	•
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili	to I in the J December 1
ar rioriua limineu rarineimin of Liminea Lixdii	ty Limited Partnership:
Signatures of ALL General Partners.	
Signatures of <u>ALL</u> General Partners.	
Signatures of <u>ALL</u> General Partners. <u>All others:</u>	
Signatures of ALL General Partners. All others: Signature of an authorized person. Fees: Articles of Conversion:	\$25.00
Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:	\$25.00 \$125.00 \$30.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLE II - Address:	
The mailing address and street address of t	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
14605 9th St N, Unit 21 Charwater, FL 33762	CLEINWATER, FL 33762
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	Registered Agent. You must designate an ind radial or another the registered agent are:
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	Registered Agent. You must designate an ind radial or another the registered agent are:
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Sychology we	Tay Name
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Sycloy WC	Tay Name
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Sycloy WC	Registered Agent. You must designate an individual or another the registered agent are: Name (P.O. Box NOT acceptable)

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)

Δ	RT	Γ	E.	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 AAABIZ	Shelby Westau 313 & hunting ton arch portst war FL, 34984
AMBR	Steven otero Rochiguez 11774 Westvirw picwy apt 58 San cliego, C.A. 92126
(Use attachment if necessary)	TALL AND SSE
CLE V: Other provisions, if any.	OF STATE
REQUIRED SIGNATURE:	
SWW	ww
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware nent to the Department of State constitutes a third degree for
Shelloy 1	ped or printed name of signee