# L22000349957

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





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#### **COVER LETTER**

TO:	New Filing S Division of C					
SUB.	JECT: Backdra	ft Apparel LLC				
			sulting Florida Lir	nited Cor	mpany)	<del></del>
The e Busin	nclosed Article less Entity" into	es of Conversion, Artic o a "Florida Limited L	eles of Organiza iability Compa	tion, ar 1y" in a	nd fees are submitted accordance with s. 60	to convert an "Other 5.1045, F.S.
Please	e return all corr	respondence concernin	g this matter to	:		
Ashle	y Felsot					
		(Contact Person)		<del></del>		
Backo	Iraft Apparel CO					
		(Firm/Company)		<del></del>		202
3269	Palomino Drive					77.00 17.00 17.00
		(Address)				
Lake \	Worth, FL 33462					2022 AUC -2 PH 1: 25
	((	City, State and Zip Code)				
backd	raftapparelco@g	ımail.com				
E-r	nail Address: (to b	e used for future annual re	port notifications)			
For fu	irther informati	on concerning this ma	tter, please call			
•	y Felsot				3539	
	(Name of Conta	ict Person)	(Area Cod	2) (Day	3539 rtime Telephone Number	)
Enclo dollar	sed is a check f s and drawn on	or the following amou a bank located in the	int: (All checks			
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles unization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filin and Certified Co	~	□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
	Mailing Add New Filing So Division of C P.O. Box 632 Tallahassee, F	ection orporations 7		New I Divis: The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Su	site 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: Backdraft Apparel CO
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
08/18/2021
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the <b>attached Articles of Organization:</b> Backdraft Apparel 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

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which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.

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Signed this 30	_ day of <u>July</u>	20 <u>20</u>
Signature of Author	rized Representative of Lir	nited Liability Company:
Signature of Authoriz Printed Name: Ashley	zed Representative: (?)	Control October President
		[See below for required signature(s)]
Signature:		
Printed Name: Darren	Felsot	Title: Vice President
Signature:	- <u>-</u>	
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Printed Name:		Title:
Printed Name:		Title:
Signature:		Tid
Timed Name.		Title:
If Florida Corporation Signature of Chairman If Directors or Officers	on: , Vice Chairman, Director, or s have not been selected, an Ir	Officer. neorporator must sign.
If Florida General Pa Signature of one General	<mark>irtnership or Limited Liabil</mark> ral Partner.	lity Partnership:
If Florida Limited Pa Signatures of ALL Ge	rtnership or Limited Liabil neral Partners.	ity Limited Partnership:
All others: Signature of an authori	zed person.	
Fees:		

\$25.00

\$125.00

S30.00 (Optional) S5.00 (Optional)

Articles of Conversion:

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: 2022 AUS -2 PH 4: 25

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na The name of the 3	ame: Limited Liability Comp	anu je	
	Emmed Elatinty Comp	uny 18.	
Backdraft Apparel	LLC		
		Liability Company, "L.L.C.," or "LLC	;;")
ARTICLE II - A	.ddress:		
		the principal office of the Lir	mited Liability Company is:
Principal Office	Address:	Mailing Address:	
3269 Palomino Dri			
Lake Worth, FL 33	· · · · · · · · · · · · · · · · · · ·	<u>3269 Palomino Drive</u> Lake Worth, FL 33462	<del>_</del>
			<del></del>
ADTICLE			
(The Limited Liability)	<b>Registered Agent, Reg</b> i Company cannot serve as its ow ractive Florida registration )	istered Office, & Registered in Registered Agent. You must designat	Agent's Signature: te an individual or another
The name and the	Florida street address o	of the registered agent are:	
	Ashley Felsot		
		Name	-
	3269 Patomino Drive		
	Florida street addres	s (P.O. Box <u>NOT</u> acceptable)	_
	Lake Worth	FL 33462	
	City	Zip	_
Having been no	imed as registored nami	and to accept service of proce	we for the above of stad limited
liability com	pany at the place design	ated in this certificate, I hereby	ss for the above statea timitea : Faccept the appointment as
registered ageni	and agree to act in this	capacity. I further agree to co	mply with the provisions of all
statutes relativ	ig to the proper and com	plete performance of my duties	s, and I am familiar with and
accept the th	ragations of my position	as registered agent as provide	ed for in Chapter 605, F.S
	(0)	Talled	
	Daging and Accept	H V V V V	<u> </u>
	Registered Agent	s Signature (REQUIRED)	
			262 
	(CO)	NTINUED)	7***) 70#

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#### ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:		
(Use attachment if necessary)			
CLE V: Other provisions, if any.			
REQUIRED SIGNATURE:	eilley Folkett		
I his document is executed in accordance	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree felo		
Tyl	ped 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)