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

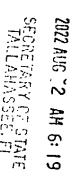
Office Use Only



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COVER LETTER

TO: New Filing ! Division of (Section Corporations				
SUBJECT: Trader7	720 LLC				
<u></u>	(Name of Re	sulting Florida L	imited Co	mpany)	_
				nd fees are submitted to accordance with s. 605.1	
Please return all cor	respondence concernin	g this matter t	o:		
Mark A. Chapin					
	(Contact Person)	· -			
Trader720 LLC					
	(Firm/Company)				
4193 Canino Ct					
	(Address)				
Wesley Chapel, FL 33	3543				
	(City, State and Zip Code)				
chapinmark@gmail.co	om				
E-mail Address: (to	be used for future annual re	port notification:	s)		
For further informat	ion concerning this ma	tter, please ca	II:		
Mark A. Chapin		_at (,429-	8045	
(Name of Cont	act Person)	(Area Co	ode) (Da	ytime Telephone Number)	-
	for the following amount a bank located in the		•	sed by this office must b	be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□S180.00 Fil and Certified 0	-	■\$185.00 Filing Fees. Certified Copy. and Certificate of Status	
<u>Mailing Ado</u> New Filing S				t Address: Filing Section	
Division of C				ion of Corporations	\$ 2

The Centre of Tallahassee

2415 N. Monroe Street, Suite 8 10 77 Tallahassee, Fl. 32303

P.O. Box 6327

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: Trader720 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, 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)
January 1, 2016 on .
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Trader720 LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: August 15, 2022
(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.

Signed this 11 day of August	_ 20
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:	Title: Managing Member
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature: Mank A. Chapin Printed Name: Mark A. Chapin	
Printed Name: Mark A. Chapin	Title: Managing Member
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Trader720 LLC	
(Must contain the words "Lin	nited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	s of the principal office of the Limited Liability Company is:
The maning address and street address.	of the principal variet of the Emilier Editing Company is.
Principal Office Address:	Mailing Address:
	4193 Canino Ct
4193 Canino Ct	4195 Carillo Ct
4193 Canino Ct Wesley Chapel, FL 33543	Wesley Chapel, FL 33543

The name and the Florida street address of the registered agent are:

Mark A. Chapin	
N	ame
4193 Canino Ct	
Florida street address (P.O. Box <u>NOT</u> acceptable)
Wesley Chapel	FL 33543
City	Zip

Having been named as registered agent and to accept service of process for the above stated limited 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)

(CONTINUED)



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Mark A. Chapin

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					
MGR	Mark A. Chapin 4193 Canino Ct				
	Wesley Chapel, FL 33543				
					
	 -				
(Use attachment if necessary)					
CLE V: Other provisions, if any.					
·					
REQUIRED SIGNATURE:					
Mala. 6-	*************				
	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, I am aware that				
any false information submitted in a docum	nent to the Department of State constitutes a third degree felon				
as provided for in s.817.155, F.S.	dentity the preparation of characteristicates a unit degree (close				

Typed 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)