12000385683

(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:			
W22000100299			

Office Use Only



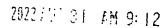
400391520344

07/25/22--01034--006 **150.00









Division of Corporations

August 2, 2022

ROXANNE WILEY 6329 FALCONWOOD ST BALTIMORE, MD 21220

SUBJECT: STINGOC LLC Ref. Number: W22000100299

We have received your document for STINGOC LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Only non-United States entities may become a domestic limited liability company as stated in section 605.1052, Florida Statutes. You may want to explore one of the conversion options. Please return to our website sunbiz.org to download the appropriate form.

We are enclosing the proper form(s) with instructions for your convenience.

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: 022A00017255

RECEIVED AUG 3 0 2022

www.sunbiz.org

Di initia of Communications D.O. POV 6297 Tollahanna Florida 29314

2022 AUG 31 AH 8: 23

COVER LETTER

TO:	New Filing Se Division of Co						
SUBJ	ECT:	Stra Name of Resi	OC LLC	rd Com	nany)		
The en	nclosed Articles ess Entity" into	of Conversion, Articl	es of Organization	on, and	I fees are submitted to coordance with s. 605.10	convert a 045, F.S.	.n "Other
Please	return all corre	spondence concerning	g this matter to:				
	fox St	CONTACT Person) MOC LL (Fifn/Company)	itey C				
62	29 Fal	Con wod (Address) MY	87 11220				
Е-п	Stingo	City, State and Zip Code) City, State and Zip Code) e used for future arrhual representations.	all.cor	h			
For fu		on concerning this mat Control Wilderstein (Person)) 80 (Day	8-2974 time 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 p United States)	rocess	ed by this office must be early have	pe payab	le in US
☐ \$15 (\$25 fo & \$125		S155.00 Filing Fees and Certificate of Status		Fees	t.		
	Mailing Add New Filing So Division of C P.O. Box 632 Tallahassee, h	ection orporations 7		New F Divisi The C 2415 I	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite	SECRETARY OF TALLAH SEE	2022 AUG 31 AN

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.

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
First organized, formed or incorporated under the laws of
on 6-11-2019 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: (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 which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.
SECRETARY OF TALLAHASSE

Signed this	_ day of	20	
	rized Representative of Lim		
Signature of Authoriz Printed Name: 257	zed Representative: for	nne Willy Title: <u>Chairman</u>	_
Signature(s) on behal	lf of Other Business Entity:	[See below for required signature(s)]	
_	•	7 Title: Chairman	<u> </u>
Signature:Printed Name:		Title:	-
Signature:Printed Name:		Title:	
Signature: Printed Name:		Title:	-
Signature:Printed Name:		Title:	<u> </u>
Signature:Printed Name:		Title:	-
	on: n, Vice Chairman, Director, o rs have not been selected, an I		
If Florida General P: Signature of one Gene	artnership or Limited Liabi eral Partner.	lity Partnership:	
If Florida Limited Pa Signatures of ALL Go	artnership or Limited Liabi eneral Partners.	lity Limited Partnership:	
All others: Signature of an author	rized person.		
Fees:			رئ رئ
Articles of Co Fees for Flori Certified Cop Certificate of	ida Articles of Organization: by:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	CRETARY O. ALLAHASSI

ZZ AUG 31 AM 8: 22 Cretary of State

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: 16706 Vardun Temaci Unut 302 Bradentin PL 34211 Mailing Address: 6329 Falcun word of Galpmure Mp 2/220
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are: Look Vardon Terrau Unit 302 Florida street address (P.O. Box NOT acceptable) Pradenton FL 39211 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)

Ā	RT	CI	\mathbf{F}	IV-
	1 1			. , –

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:			
"MGR" = Manager MGY MGY	Pokanne Wiley 6329 Falconwood & Baltmore MD 21220 Policy Wiley 6329 Falconwood & Baltmore MD 21220			
	2022 AUG SEGRETALLA			
(Use attachment if necessary) ARTICLE V: Other provisions, if any.	ARY OF STATAL			
	22			
REQUIRED SIGNATURE:	e triley			
This document is executed in accordance w	n authorized representative of a member ith section 605.0203 (1) (b). Florida Statutes, I am aware that ent to the Department of State constitutes a third degree felony			
Poxa	nne Wiley ed or printed name of signle			
Турс	ed or printed name of signee Filing Fees			
	1 HH12 CCS			

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)

STATE OF MARYLAND Department of Assessments and Taxation

I, MICHAEL L. HIGGS OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES. OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT STINGOC LLC (W19737204), REGISTERED JUNE 11, 2019, IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND. AT BALTIMORE ON THIS JULY 16, 2022.

Michael L. Higgs

Director



2022 AUG 31 AN 8: 22 SECRETARY OF STATE TALLAHASSEE, FI

301 West Preston Street, Baltimore, Maryland 21201
Telephone Baltimore Metro (410) 767-1340 / Outside Baltimore Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice

Online Certificate Authentication Code: md6uQVYq0U_IFpaS0BVu5g To verify the Authentication Code, visit http://dat.may.land.gov/verify