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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

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FILE I

## COVERLETTER

TO:	New Filing So Division of C					
SUBJ	ECT:	LEMA VENTUE	RES. L.LC			
	-, -,	(Name of Res	sulting Florida Limite	ed Comp	rany)	
					fees are submitted to convert an "O cordance with s. 605,1045, F.S.	ther
Please	return all corre	espondence concerning	g this matter to:			
		(Contact Person)				
	LEMA U	EHTURES L.L. (Firm Company)	C.			
318	Starke L	(Ke Cir,				
<u> Occ</u>	see, FL	3476 j Tity, State and Zip Code)				
<u>I</u> E-n	caty 10 70 mail Address: (10 b	1 @ gmoil Com	nort notifications)			
For fu	rther information	on concerning this mat	tter, please call;			
L	esly Lema (Name of Conta	A ct Person)	at ( <u>213</u> ) (Area Code)	) <u>21</u> (Dayti	Cr - 5306 me Telephone Number)	
		or the following amou a bank located in the I	•	rocesse	d by this office must be payable in t	US
(\$25 for & \$125		□\$155.00 Filing Fees and Certificate of Status		Ÿ	□\$185.00 Filing Fees. Certified Copy. and Certificate of Status	
	Mailing Addr New Filing Se				Address: ling Section	
	Division of Co	orporations	I	Divisio	n of Corporations	
	P.O. Box 632 Tallahassee, F				ntre of Tallahassee . Monroe Street, Suite 810	
					ssee: F1: 32303	

### 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.

	VENTURES, (Emer A	Same of Other Bus	iness Entity)		
2. The "Other	Business Entity" is a	LL.	C .	tourchin upon	non law or business trust, etc
					non raw or ousiness trust, etc
First organized.	formed or incorporated	d under the law	s of Utah.		he name of the country)
on Octob	er 27 2021 zation, formation or incorpo	·	(isher state, or if a nor	O.D. CHIRTY, II	ne name of the country)
(date of organ	zatión, formatión or incorpo	oration)			
3. The name of	the Florida Limited Li	ability Compan	y as set forth in the	attached Ar	ticles of Organization:
LEH	A VENTURES	رن د.			
	A VENTURES (Enter Name of F	Horida Limited Lia	bility Company)		<del></del> '
(The effective of the date this d	late: Cannot be prior ocument is filed by the	to date of rece e Florida Depa	rtment of State.)	- more than	90 calendar days after
(The effective of the date this do Note: If the date i document's effecti	late: Cannot be prior	to date of rece e Florida Depa of meet the applica of State's records.	ipt or filed date nor rtment of State.) ble statutory filing requi	more than rements, this d	90 calendar days after ate will not be listed as the
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Signed this10 Hr day of	20 <u>0.2</u>	
Signature of Authorized Representative of Lina	ited Liability Company:	
Signature of Authorized Representative: Printed Name: Lesty Tahana Come, Report	Title: Concer CEC	
Signature(s) on behalf of Other Business Entity:		
Signature: Lesly Lema 2/4 Printed Name:	Title:(_ <u>5</u>	
Signature: Lesiy Lema 2/4 Printed Name: Signature: Mother Funda Printed Name: Mother Lighty	Title: General Partner	
Signature: Printed Name.		
Signature: Printed Name:		
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 Liability Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	
All others: Signature of an authorized person.		
<u>Fccs:</u>	WARRIED TO THE TOTAL TOTAL TO THE TOTAL TOTAL TO THE TOTA	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	<b></b>
<del></del>	- · · · · · · · · · · · · · · · · · · ·	· · · · · · · · ·

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE II - Address: The mailting address and street address of the principal office of the Limited Liability Company is:  Principal Office Address:    Mailting Address:   Mailting Address:   Mailting Address:	ARTICLE I - Name: The name of the Limited Liability Company is:		
The mailing address and street address of the principal office of the Limited Liability Company is:    Principal Office Address:   Mailing Address:	<u> 「三円A」 VミハマルとES しょで</u> (Must contain the words Limited Liability	Company, "L.L.C.," or "LL.C.")	<del></del>
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:    Matthew O George   Fl. 3476		ncipal office of the Limite	ed Liability Company is:
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:    1/4	Principal Office Address:	Mailing Address:	
The name and the Florida street address of the registered agent are:    Matthew O   Lichty   Name   Name	315 Starke Lake Cir Quec, FL 34761	818 Shorke Laki	e Car Riol
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	(The Limited Liability Company cannot serve as its own Register		
Florida street address (P.O. Box NOT acceptable)  Ocean FL 3474    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	The name and the Florida street address of the re-	gistered agent are:	01 <b>20</b>
Florida street address (P.O. Box NOT acceptable)  Ocean FL 3474    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	Mathew O liech	.ty	ANTINA SS SS 2
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$\sim$ $\sim$ $\sim$ $\sim$	liability company at the place designated in t registered agent and agree to act in this capacity statutes relating to the proper and complete pe	his certificate, I hereby ac v. I further agree to comport or formance of my duties, as	cept the appointment as ly with the provisions of all nd I am familiar with and
Registered Agent's Signature (REQUIRED)	Registered Agent's Signa	ture (REQUIRED)	
(CONTINUED)	(CONTINU	<u>ED)</u>	

Company.	
<u>Title:</u> "AMBR" - Authorized Member	Name and Address:
"MGR" Manager Lesky comes & EO	818 Starke Lauce Civ
	(Xere, F-L 34761
Halitian Liedy AMBR	318 Starke Like Civ-
	Chare, FL 34701
(Use attachment if necessary)	
LE V: Other provisions, if any,	
REQUIRED SIGNATURE: 7	1 A
	44
This document is executed in accordance w	n authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware that
as provided for in 5.817.135. F.S.	ent to the Department of State constitutes a third degree felony
Lesty late	ed or printed name of signee
S125.00 Filing Fee for Articles of	Filing Fees

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

ARTICLE IV-