122000438397

	(Requestor's Name)
	(Address)
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PICK-UF	WAIT MAIL
	(Business Entity Name)
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Certified Copies	Certificates of Status
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. ----- 22 OCT -4 AN 1123 9CT 12 PN 3-10

COVER LETTER

TO: New Fili Division	ng Section of Corporations		
SUBJECT:		AFIX LLC	
	(Name of Re	sulting Florida Limited Co	ompany)
			and fees are submitted to convert an "Othe accordance with s. 605.1045, F.S.
Please return all	correspondence concernin	g this matter to:	
Irina Roth Neur	nann, Esq.		
	(Contact Person)		
Roth Private Ad	vising Law		
	(Firm/Company)		
1000 Brickell Av	re., Suite 1100		
	(Address)		
Miami, FL, 3313	31		
	(City, State and Zip Code)		
irina@rothpalas	v.com		
E-mail Address:	(to be used for future annual re	eport notifications)	
For further infor	mation concerning this ma	tter, please call:	
Irina Roth l	Neumann, Esq.	at (305)	798-8878
(Name of	Contact Person)		sytime Telephone Number)
	eck for the following amount on a bank located in the		ssed by this office must be payable in US
☑ \$150.00 Filing F (\$25 for Conversion & \$125 for Articles of Organization)	-	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Division P.O. Box	ng Section of Corporations	New Divi The 2415	et Address: Filing Section sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 ahassee, FL 32303



October 10, 2022

CORPORATE ACCESS, INC.

SUBJECT: AFIX CORP

Ref. Number: P22000073460

X

We have received your document for AFIX CORP and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 822A00022584

www.sunbiz.org

DO DOV GOOD BUILD BUILD ON

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 Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion AFIX CORP	on is:
(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	<u> </u>
First organized, formed or incorporated under the laws of Florida	trust, etc.)
(Enter state, or if a non-U.S. entity, the name of the coun	try)
on 09/11/2018	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organi	zation:
AFIX LLC	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: 07/21/2022	
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar day 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 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.

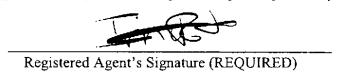
Signed this 11th day of October	20
Signature of Authorized Representative of Limit	ited Liability Company:
Signature of Authorized Representative: 444 Printed Name: Isaac Cohen	Title: Manager
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Printed Name: Isaac Cohen	Title: Director
Signature:	
Signature: Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
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 Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
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)

DIVISION OF COMPONITION
22 CCT 12 FN 3: 10

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	AFIX	LLC		
(Must c	ontain the words "Limited Lia	ability Company, "	L.L.C.," or "LLC.")	
ARTICLE II - Addr The mailing address a	ess: nd street address of the	e principal of	fice of the Limite	ed Liability Compan
Principal Office Add	ress:	<u>Mailing</u>	Address:	
1010 BRICKELL AVI	E, APT. 4305	1010 B	RICKELL AVE, A	APT. 4305
MIAMI, FL 33131		MIAM	I, FL 33131	
ARTICLE III - Regi (The Limited Liability Comp business entity with an activ	any cannot serve as its own R e Florida registration.)	legistered Agent. Y	ou must designate an	individual or another
The name and the Flo	rida street address of the	Ü	J	3.5.5 JANE
	ROTH PRIVATE		LAW	133 Sign 0
		am a		- Z
	N	anc		
	Ni 1000 BRICKELL		1100	PM
		. AVE., SUITE		- S
F	1000 BRICKELL	. AVE., SUITE		PM PM

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.



AR	TIC	LE	ľ	V-
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The name and address of each person authorized to manage and control the Limited Liability Company:

I IIIe: 'AMBR" = Authorized Member	
'MGR" = Manager	
MGR — Manager	Isaac Cohen
	1010 BRICKELL AVE, APT. 4305
	MIAMI, FL 33131
Use attachment if necessary)	
Use attachment if necessary) LE V: Other provisions, if any.	n#t
LE V: Other provisions, if any. REQUIRED SIGNATURE:	an authorized representative of a member
LE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance.	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware ament to the Department of State constitutes a third degree for
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document is a document in a docum	e with section 605.0203 (1) (b), Florida Statutes. I am aware
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document of a provided for in s.817.155, F.S.	e with section 605.0203 (1) (b), Florida Statutes. I am aware ament to the Department of State constitutes a third degree for