122000480223

(Re	questor's Name)		
(Ad	dress)		
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(Cit	ry/State/Zip/Phone #	f)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Name	e)	
(Do	cument Number)		
Certified Copies	ies Certificates of Status		
Special Instructions to	Filing Officer:		
1			

Office Use Only



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11/04/22--01019--017 **150.00

SECRETARY OF STATE
ALLAHASSEE, FLORID.

FILED





November 1, 2022

New Filing Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314-6327

RE: LEW Products, LLC (conversion from Indiana to Florida)

Enclosed please find Articles of Conversion for Other Business Entity Into Florida Limited Liability Company for filing and check number 2660 in the amount of \$150.00 in payment of fees, regarding the above.

Please use the below address for all correspondence and if further information is needed for this matter.

Sincerely,

Eric S. Haug

Enclosures

SECRETARY OF STATE

T 850 583 1480 F 855 825 4449 https://proper-law.com

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: LEW PRODUCTS, 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.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S, entity, the name of the country)
April 19, 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:
LEW PRODUCTS. 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.
SOF 1
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 27th day of Octob	per 20 <u>22</u> .
Signature of Authorized Represen	tative of Limited Liability Company:
Signature of Authorized Representat Printed Name: <u>Dustin White</u>	ive:Title: Authroized Member
	iness Entity: [See below for required signature(s)
Signature: Printed Name: Dustin White	Title: Member
Signature:Printed Name:	Title:
Signature:	
If Florida Corporation: Signature of Chairman, Vice Chairma If Directors or Officers have not been	
If Florida General Partnership or L Signature of one General Partner.	imited Liability Partnership:
If Florida Limited Partnership or L Signatures of ALL General Partners.	imited Liability Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
	** = " · · · ·

Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00

Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company	· is:	
LEW PRODUCTS. LLC		
	ability Company, "L.L.C.," or "L1,C.")	
ARTICLE II - Address:		
The mailing address and street address of th	e principal office of the Limited I	iability Company is:
Principal Office Address:	Mailing Address:	
350 Coco Point	350 Coco Point	
St. Augustine FL 32092	St. Augustine FL 32092	
		
(The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.) The name and the Florida street address of t		T.
Dustin White	ame	22 SEC
,	anc	NOV -4 PK
350 Cocco Point		ASSE L
Florida street address (P.O. Box <u>NOT</u> acceptable)	E P P
St. Augustine	FL 32092	
City	Zip	22 NOV -4 PHII: 15 SECRETARY OF STATE ALLAHASSEE, FLOPIO
Having been named as registered agent ar liability company at the place designate registered agent and agree to act in this ca	ed in this certificate. Thereby accep	the above stated limited of the appointment as

(CONTINUED)

ARTICLE IV-

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

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	ARE IN

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Dustin White

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)