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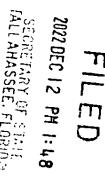
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
, , , , ,		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
		
Special Instructions to Filing Officer:		

Office Use Only



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12/12/22--01039--019 **180.00



COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Aquarius Fitness Distributors, LLC (Name of Resulting Florida Limited Company)		
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.		
Please return all correspondence concerning this matter to:		
David Kent Turker		
Aquarius Fitness Distributs. (Firm/Company)		
4 Traceways Ct.		
Orman Beach FL. 32174 (City, State and Zip Code)		
E-mail Address: (to be used for future annual report notifications)		
For further information concerning this matter, please call:		
(Name of Contact Person) at (262) 271-6345 (Area Code) (Daytime Telephone Number)		
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)		
\$150.00 Filing Fees (\$25 for Conversion & Status \$180.00 Filing Fees and Certified Copy Status \$185.00 Filing Fees & Certified Copy & Certified Copy & Certified Copy & Certificate of Status		

Mailing Address:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Acros Strices Distributes, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Corporation. (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
on 4/24/2004. (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Aquarius Fitness Distributors 264742627
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.)
<u>Note:</u> 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 <u>Ith</u> day of <u>December</u>	20 22.		
Signature of Authorized Representative of Limi	ted Liability Company:		
Signature of Authorized Representative: Printed Name: David Trent Totle: Title: Owner			
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)		
Signature:	•		
Signature: Charles Printed Name: David Trent Tucker	Title: Sole Proprietor		
Signature:			
Signature:Printed Name:	Title:		
Signature:Printed Name:	Title:		
Signature:Printed Name:			
Printed Name:	Title:		
Signature:			
Signature:Printed Name:	Title:		
Signature:Printed Name:	Title		
Timed Name.			
If Florida Corporation:	2.22		
Signature of Chairman, Vice Chairman, Director, or			
If Directors or Officers have not been selected, an Inc	corporator must sign.		
<u>If Florida General Partnership or Limited Liabili</u>	ty Partnership:		
Signature of one General Partner.			
If Florida Limited Partnership or Limited Liabili	ty Limited Partnershin:		
Signatures of ALL General Partners.	y Emilia Cartillians		
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 I - Name: The name of the Limited Liability Company is: **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: Mailing Address: **Principal Office Address:** 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: Name Florida street address (P.O. Box NOT acceptable) 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)

Company:	
Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address: Dayid Trent Tucker U Traceways Ct. Orman Bouch FL. 32174.
(Use attachment if necessary) ARTICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	J. LL.
This document is executed in accordance vany false information submitted in a docume as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that the dependent of State constitutes a third degree felony and the degree felony are the the degre
Тур	ed 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)

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

ARTICLE IV-