# L22000534167

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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S. CHATHAM



2022 DEC 22 PH 3: U

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

CURV GROUP	LLC			
·		· · · · · ·	1	Art of Inc. File
			i	LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend, File
			<u> </u>	RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
				Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature		<del></del>		Fictitious Owner Search
o.gaca.o				Vehicle Search
				Driving Record
Requested by:				UCC 1 or 3 File
Name	Data	Time		UCC 11 Search
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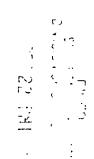
## Articles of Conversion

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: Curv Group, 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.)
(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)
May 28, 2013
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Curv Group, 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.
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 21st day of December	20_22
Signature of Authorized Representative	of Limited Liability Company:
Signature of Authorized Representative: _	Man
Printed Name: Michael Tunney	Title: Manager
Signature(s) on behalf of Other Business	Entity: [See below for required signature(s)]
Signature:	
Printed Name: Michael Tunney	Title: Manager
Signature:	The state of the s
Printed Name:	Title:
Signature:	70.4
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
· — — —	Title:

If Directors or Officers have not been selected, an Incorporator must sign.

#### If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

#### If Florida Limited Partnership or Limited Liability Limited Partnership:

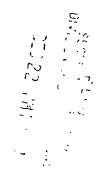
Signatures of <u>ALL</u> General Partners.

#### All others:

Signature of an authorized person.

Fees:

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



#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Curv Group, LLC			
(1)	Must contain the words "Limited Lie	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - A	ddress:		
The mailing addr	ess and street address of th	e principal office of the Limited Lia	bility Company is:
Principal Office	Address:	Mailing Address:	
650 NE 32nd Stree	et	650 NE 32nd Street	
#4304		#4304	
Miami, FL 33137		Miami, FL 33137	<u> </u>
	CT Corporation System N	ame	~ ; ·
	1200 South Pine Island Ro	oad	
	Florida street address (	P.O. Box NOT acceptable)	
	Plantation	FL <sup>33324</sup>	
	City	Zip	
liability com registered agen statutes relati	amed as registered agent ar pany at the place designate t and agree to act in this ca ng to the proper and comple	Zip  Inditionaccept service of process for the  Indicate, I hereby accept to  I pacity. I further agree to comply with  I performance of my duties, and I a  I registered agent as provided for in the	he appointment as h the provisions of a m familiar with and

(CONTINUED)

Title:	Name and Address:			
"AMBR" = Authorized Member "MGR" = Manager				
MGR	Michael Tunney			
	650 NE 32nd Street, #4304			
	Miami, FL 33137	_		
		_		
		·		
		ر ت		
		_		
		_		
(Use attachment if necessary)			'	
CLE V: Other provisions, if any.				
			_	
REQUIRED SIGNATURE:				
Man				
		—		

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Pagistared Agent

ARTICLE IV-

as provided for in s.817.155, F.S.

Michael Tunney