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SECRETARY OF STATI TALLAHASSEE, FL

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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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
TNNACO Chemical CoRP. (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
on //2/2023 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Invaco Chemical LLC (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 12/30/2022. 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 locument'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.

2023 JAN 12 AM 4: 4.2 SECRETARY OF STATE

Signed this	2/12 day of _	January	20	23	_:	
Signature of Aut	thorized Repr	resentative of Lim	ited Lia	bility C	ompany	<u>.</u>
Signature of Auth Printed Name:	orized Repres	centative:	Title:	Di	Odo	·r
Signature(s) on b	ehalf of Other	Business Entity:	[See bel	ow for r	equired :	signature(s)]
Signature:	France	ko Bern	2			
Printed Name:	Emm.	anuel & Ind	Title:	-D	refo	~
Printed Name:			Title:			
Signatura						
Printed Name:	,	· · · · · · · · · · · · · · · · · · ·	Title:			
Signature:			Title			
Signature:						
Printed Name:			Title:			-
Signature:						
Printed Name:			Title:			
	man, Vice Cha	irman, Director, or s been selected, an Inc		or must s	ign.	
If Florida General Signature of one G		or Limited Liabili	<u>ty Partn</u>	ership:		
If Florida Limited Signatures of ALL		or Limited Liabilit crs.	ty Limit	ed Partn	ership:	
All others: Signature of an autl	horized person					
Fees:						

\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Articles of Conversion:

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

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SECRETARY OF STAT

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company i.	s:	
TNNA CO Chemical (Must contain the words "Limited Liabi	110.	
ARTICLE II - Address:	TAXID: 92-	1637772
The mailing address and street address of the p	principal office of the Lim	nited Liability Company is:
Principal Office Address:	Mailing Address:	
175 SALEM COUNT TALLEHOSSEE, FL 32301	175 5Alem	Court
TAllehossee, FL 3230/	Tollohassa	e, 12.3230/
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	istered Agent. You must designate	
The name and the Florida street address of the	registered agent are:	
_ Ennoved	P. Twwang	
Nan	ie /	
175 Splem (A) Florida street address (P.0	O. Box NOT acceptable)	
	FL 3230/ Zin	
City	Zip	
Having been named as registered agent and liability company at the place designated tregistered agent and agree to act in this capa statutes relating to the proper and complete accept the obligations of my position as re	in this certificate, I hereby city. I further agree to con performance of my duties,	accept the appointment as nply with the provisions of all and I am familiar with and
	Bus	
Registered Agent's Sig	nature (REQUIRED)	- s 20
(CONTIN	NUED)	E ILED 2023 JAN 12 AM 4: SECRETARY OF ST TALLAHASSEE. 1

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

	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
4 In D P	Forman well Tum and
-//11/0/~	Emmanuell Tungang
	Tallahossee ITC 3230
	
(Use attachment if necessary)	
(,,,	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	an authorized representative of a member
Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the
Signature of a member or This document is executed in accordance any false information submitted in a docur	with section 605.0203 (1) (b), Florida Statutes, I am aware the ment to the Department of State constitutes a third degree felo
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