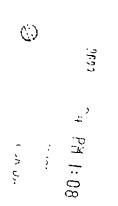


(Req	uestor's Name)	
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PICK-UP	MAIT	MAIL
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Special Instructions to F	iling Officer:	





23 JAN 24 PM 3: 10
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COVER LETTER

TO: New Filing Section Division of Corpo				
SUBJECT: 1 jam	(Name of Resu	des; 9 ns Iting Florida Limited Com	and Flooring	19 LLC
The enclosed Articles of G Business Entity" into a "F		_		
Please return all correspo	ndence concerning	this matter to:		
Jerson D r (c) Lianz (vs	irm/Company)	igns and Flo	eoring LLC	
920 Hunti	<u>ngten</u> dr (Address)			
Panamy (City, St. Serson DML) E-mail Address: (to be use	• '			23 JAN 24 PM 3: 10 SECRETARY OF SAME TALLAMASSEE OF SAME
For further information co	oncerning this matt	er, please call:		
(Name of Contact Pe	rson)	at (275) 75 (Area Code) (Day	time Telephone Number)	- 1000 G
Enclosed is a check for the dollars and drawn on a ba			ed by this office must b	pe payable in US
	\$155.00 Filing Fees I Certificate of tus	☐\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Address:	<u>!</u>	Street	Address:	

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

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: Liam (USian design) and Flocting LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Liam (U5+om design) and Flooring LC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Proprior Ville Louis, 5,9109 (Enter state, or if a non-U.S. entity, the name of the country)
on 8/06/2020 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Liam (USFCI) (eSiONS and Florida Limited Liability Company) (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 annuaries has been accounted in accordance with all and includes

- 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 24 day of 02	20 <u> 2.3</u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: /c/ Printed Name: /crson Lopez	SON LOPCE. Title: CONVEST LLC
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature: Jerson Jepez Printed Name: Jerson Lopez	
Printed Name: <u>Jersen</u> <u>Le pez</u>	_ Title: <u>(.01) </u>
Signature:	
Signature:Printed Name:	Title:
Signature: Printed Name:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of the Directors or Officers have not been selected, an Inc.	
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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Liam Custom designs (Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
920 Huntington ds Pangma City FL 32401	Polloma City FL 32401
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	
The name and the Florida street address of the respective $\frac{\int c(SON) D Mo}{Name}$ Name $\frac{920 hunfing}{Florida street address (P.O.)}$ Florida street address (P.O.) $\frac{pqnumq}{City}$	Hon dr Box NOT acceptable)
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as try. I further agree to comply with the provisions of a terformance of my duties, and I am familiar with and istered agent as provided for in Chapter 609, F.S.

(CONTINUED)

ARTICLE IV-

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

. . . .

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager MGR	Jerson D Martinez Lepez	
	920 hontington dr panama City 3240)]
(Use attachment if necessary)		
RTICLE V: Other provisions, if any.	IAS 2	
	CAR SA	1
REQUIRED SIGNATURE:	SEE TO YEAR OF THE PROPERTY OF	1
	$\frac{10000}{1000}$	j
This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony	
Jerson D Me	ped or printed name of signee	
ı yı	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)