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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
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soral Instructions to Filing Officer:

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155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

02/01/23

NAME: HW ASSETS LLC

TYPE OF FILING: CONVERSION

COST:

150.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

B-1 PH 5: 43

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, Flori-Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: HW ASSETS 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,
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust,
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
7/19/2019
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organizatio HW ASSETS LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 1/26/2023 3:03 PM PST (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days aft
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days aft 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

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 26th day of January	20_ <u></u>			
Signature of Authorized Representative of Limited Liability Company:				
Signature of Authorized Representative: Printed Name: HASSAN WHITESIDE	Title: Manager			
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]				
Signature: Signature: Printed Name: HASSAN WHI ESI DE	Title: Manager			
Signature:				
Printed Name:	Title:			
Signature				
Signature:Printed Name:	Title:			
Signature:	m: 1			
Printed Name:	Title:			
Signature:				
Printed Name:				
Signature:	T'AL.			
Printed Name:	_ 1 ide:			
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer.				
If Directors or Officers have not been selected, an Inc	corporator 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 ALL General Partners.				
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)			

ADDITION N. M.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is: HW ASSETS LLC	
(Must contain the words "Limited Liability Company, "L.I.C.," or "LLC.")	
ARTICLE II - Address:	
The mailing address and street address of the principal office of the Limited Liability Co	ompany is
Bringing Office Address.	
Principal Office Address: Mailing Address:	
12657 Alcosta Blvd., Ste. 500 c/o MAI Capital Management	
San Ramon, CA 94583 12657 Alcosta Blvd., Ste. 500	
San Ramon, CA 94583	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatur (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:	2023 FEB - I
GKL Registered Agents, Inc.	유 공
Name	
_28089 Vanderbiit Dr, Suite 201	5: 43
	L1
Florida street address (P.O. Box <u>NOT</u> acceptable)	
Florida street address (P.O. Box <u>NOT</u> acceptable) Bonita Springs FL 34134	

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)

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: HASSAN WHITESIDE 12657 Alcosta Blvd., Ste. 500 San Ramon, CA 94583		
"MGR" = Manager MGR			
			
			
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(Use attachment if necessary)	AHAS S		
ARTICLE V: Other provisions, if any.	n	F STATE	
REQUIRED SIGNATURE:			
This document is executed in accordance was any false information submitted in a document of the control of the	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am awa ent to the Department of State constitutes a third degree document by:	re that	
HASSAN WHITESIDE, Manager	St. U.A.	_	
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)