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(Ad	ldress)	
(Cit	ty/State/Zip/Phone #	<u>r)</u>
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PICK-UP	WAIT	MAIL
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(Bu	isiness Entity Name	)
(Do	cument Number)	-
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Special Instructions to	Filing Officer:	
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Office Use Only



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## COVER LETTER

FO: New Filing Section Division of Corporations		
SUBJECT: Streamertail Holdings LLC		
(Name of Res	sulting Florida Limi	nited Company)
Business Entity" into a "Florida Limited 1.	iability Company	
Please return all correspondence concernin	ig this matter to:	ν;
Terry-Ann Lynch		
(Contact Person)		
(Firm/Company)	<del></del> -	_
6511 Nova Drive, Suite 198		<del></del>
(Address)		
Davie, FL 33317		<del></del>
(City, State and Zip Code)		
streamertailholdings@gmail.com		
E-mail Address: (to be used for future annual r	eport notifications)	s)
For further information concerning this ma	atter, please call:	II:
Terry-Ann Lynch	at ( <u>305</u>	968-9154
(Name of Contact Person)	(Area Code	ode) (Daytime Telephone Number)
Enclosed is a check for the following amodollars and drawn on a bank located in the		es processed by this office must be payable in US )
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) □ \$155.00 Filing Fees and 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:  Streamertail Holdings Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a 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
01/01/2018 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:
Streamertail Holdings 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.

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\$5.00 (Optional)

Certificate of Status:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

any is:
Liability Company, "L.L.C.," or "LLC.")
f the principal office of the Limited Liability Company is:
Mailing Address:
6511 Nova Drive
Suite 198
Davie, FL 33317
istered Office, & Registered Agent's Signature: an Registered Agent. You must designate an individual or another
of the registered agent are:

Terry-Ann	Lynch	<u> </u>
	Nar	ne
6511 Nova	a Drive, Suite 198	
Florida s	treet address (P.	O. Box <u>NOT</u> acceptable)
Davie		FL 33317
	City	Zip

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 stantes 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)

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<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager	Taran Ara Lynch	
MGR	Terry-Ann Lynch 6511 Nova Drive, Suite 198	
	Davie, FL 33317	
	Davie, PL 33317	
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(11)		
(Use attachment if necessary)		
ICLE V: Other provisions, if any.		
purpose for which this Limited Liability (	Company is organized is any and all lawful business.	
purpose for which this Emitted Eldamy		
REQUIRED SIGNATURE:		
REQUIRED SIGNATURE:	- 1	
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Typed or printed name of signce

Filing Fees

Terry-Ann Lynch

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)