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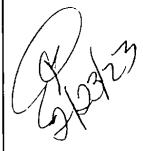
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



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2023 FEB -7 PM 12: 37 SECRETARY OF STATE

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: MNE WITH PEACHES LLC (Name of Resulting Florida Limited Company)		
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.		
Please return all correspondence concerning this matter to:		
Anna-Maria Varmal (Contact Person) Move with Peaches LLC. (Firm/Company) 12001 Abas Blud Apt 1301 (Address)		
Jacksunville FL, 32225 (City, State and Zip Code)		
E-mail Address: (to be used for future annual report notifications)		
For further information concerning this matter, please call:		
Anna-Maria Varinal at (504) 274-5296 (Area Code) (Daytime Telephone Number)		
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)		
S150.00 Filing Fees (S25 for Conversion & S125 for Articles of Organization) S150.00 Filing Fees and Certified Copy and Certificate of Status S180.00 Filing Fees and Certified Copy and Certificate of Status		
Mailing Address:Street Address:New Filing SectionNew Filing SectionDivision of CorporationsDivision of Corporations		

INHS11 (7/17)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

744

Tallahassee, FL 32303

The Centre of Tailahassee

2415 N. Monroe Street, Suite 810

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.

The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of <u>LOUISIANC</u> (Enter state, or if a non-U.S. entity, the name of the country)
on June 29, 2018 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Move With Peaches LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: FCDYUGYY14. (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 3 dd day of February	_20_23	
Signature of Authorized Representative of Limited Liability Company:		
Signature of Authorized Representative: 477 Printed Name: Anna-Maria Varma II	Title: President	
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]		
Signature: Printed Name Anna-Waria Varmall	Title: President	
Signature: Printed Name:	m. l	
Printed Name:	_ Title:	
Signature:		
Signature:Printed Name:	Title:	
Signature:		
Signature:Printed Name:		
Cimpture		
Signature: Printed Name:		
Signature:Printed Name:	Title	
Printed Name.		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. 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 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)	

FOR ED TO SEE FULL

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Move With Praches LLC.

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

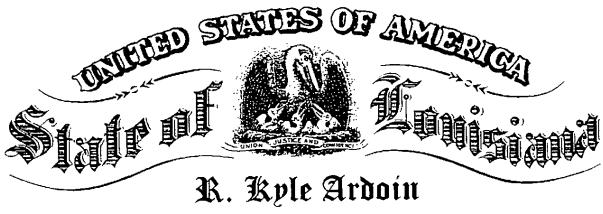
ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
Neptune Beach, FL 3221de	1225 Atlantic Blud suite 303 Neptune Beach, FL 32246	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another	
The name and the Florida street address of the re	egistered agent are:	
Anna-Maria V	armall	
1225 Atlantic Blvd Suite 303 Florida street address (P.O. Box NOT acceptable)		
Neptune Beach	FL 322(de Žip	
liability company at the place designated in registered agent and agree to act in this capact statutes relating to the proper and complete paccept the obligations of my position as reg	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and distered agent as provided for in Chapter 605, F.S	
(CONTIN	UED) 2023 F	

The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager AMBR MGR (Use attachment if necessary) ARTICLE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155/F.S. Typed or printed name of signee Filing Fees \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 5.00 Certificate of Status (Optional) \$ 30.00 Certified Copy (Optional)

ARTICLE IV-



SECRETARY OF STATE

As Secretary of State of the State of Louisiana. I do hereby Certify that

a copy of the Articles of Organization and Initial Report of

MOVE WITH PEACHES, LLC

Domiciled at HARVEY, LOUISIANA,

Was filed and recorded in this Office on June 29, 2018,

And all fees having been paid as required by law, the limited liability company is authorized to transact business in this State, subject to the restrictions imposed by law, including the provisions of R.S. Title 12, Chapter 22.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Balon Rouge on,

June 29, 2018

R 12 fe 162 Secretary of State

WEB 43107446K



Certificate ID: 10969201#BRK73

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov