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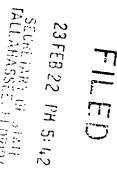
•	
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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COVER LETTER

TO: New Filing Section	
Division of Corporations	
SUBJECT: CVCC	
(Name of Res	ulting Florida Limited Company)
The enclosed Articles of Conversion, Article Business Entity" into a "Florida Limited Lin	les of Organization, and fees are submitted to convert an "Other ability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter to:
Christopher Early	
CVCC (Contact Person)	
Gall Sawyer Lucy Rd Apt 6	5-302
Sarasofa FL 34238 (City, State and Zip Code)	
Cadenspana 2009 @ gmail E-mail Address: to be used for filture annual rep	ort notifications)
For further information concerning this matt	ter, please call:
Christopher Earle	at (915) 471-4904 EB =
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amour dollars and drawn on a bank located in the L	nt: (All checks processed by this office must be payable in US)
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\int \frac{1}{3}\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy □\$185.00 Filing Fees, Certified Copy, 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 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		
(Enter state, or if a non-U.S. entity, the name of the country) on 8303000 (date of organization, formation or incorporation)		
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:		
(Enter Name of Florida Limited Liability Company) 4. If not effective on the date of filing, enter the effective date: him date of more than 90 calendar days after (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 13th day of February Signature of Authorized Representative of Limited Liability Company: Signature of Authorized Representative: _ Title: () Lunco Printed Name: Christopher Faile Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] (/Signature: A Printed Name: Christoper Colu Signature: Title: ___ Printed Name: Signature: ______ Printed Name:_____ Signature: Title: _____ Printed Name:_____ Signature: Printed Name:_____ Signature: ___ 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. Signature of an authorized person. Fees: \$25.00 Articles of Conversion: Fees for Florida Articles of Organization: \$125.00 \$30.00 (Optional)

\$5.00 (Optional)

Certified Copy: Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Chec 11C	
(Must contain the words "Limited Liability"	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Salesola Fi July 8 1 Jul 6 302	Same
6080 Patentical Dr. Sarcisck, Fl. 3	4 4343
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registere business entity with an active Florida registration.)	See R. Dogistered Agent's Signature.
The name and the Florida street address of the reg	istered agent are:
Corporat Filings Warne	23 FEB
7901 4th St 11 St Florida street address (P.O. E	2 300 \$\frac{1}{2} \text{\$\frac{1}{2}} \t
St. Petersburg	FL 33702 55
liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete per accept the obligations of my position as regist. Datid Corets	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 605, F.S
Registered Agent's Signatu	ire (KEQUIKED)

(CONTINUED)

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 (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, 1 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 \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

ARTICLE IV-