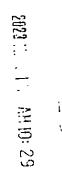
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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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COVER LETTER

TO: Nev Div	_	ection orporations				
SUBJECT	. PLUVIA	SYSTEMS LLC				
SOBJECT	·	(Name of Res	sulting Florida Lim	ited Con	npany)	
			_		id fees are submitted to convert ecordance with s. 605.1045, F.S	
Please retur	m all corr	espondence concernin	g this matter to:			
JOSE FERN	IANDO GL	JTIERREZ				
		(Contact Person)		_		
PLUVIA SYS	STEMS LL	С				
		(Firm/Company)		+		
5456 GINGE	ER COVE	DR. APT E				
		(Address)		-		
TAMPA FL 3	33634-171	7				
		Uity, State and Zip Code)	 			
fernando.qu		uviasystems.com				
		e used for future annual re	port notifications)	_		
		on concerning this ma	•			
		Ç	·	000		
JOSE FERN		<u> </u>	_at (<u></u>	_) <u>===</u>		
(Nat	ne of Conta	ect Person)	(Area Code) (Day	rtime Telephone Number)	
		or the following amou a bank located in the		process	sed by this office must be payab	ole in US
\$150,00 F (\$25 for Conv & \$125 for A of Organization	ersion rticles		□\$180.00 Filing and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mai	iling Add	ress:		Street	t Address:	
Nev	v Filing S	ection		New 1	Filing Section	
		orporations			ion of Corporations	
	. Box 632 ahassee, I				Centre of Tallahassee N. Monroe Street, Suite 810	20
1 411	anassee, I	に ジャン (ゴ			nassee, FL 32303	£ 203

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: PLUVIA SYSTEMS LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
01/13/2016 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: PLUVIA SYSTEMS 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.

Signed this 3rd day of March	20_23	
Signature of Authorized Representative of Limit	ted Liability Company:	
Signature of Authorized Representative: Printed Name: JOSE FERNANDO GUTIERREZ Signature(s) outbehalf of Other Business Entity: [3]	See below for required signature(s)]	
Signature: Printed Name: Jose Fernando Gutierrez-	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:	_ Title:	
Signature:Printed Name:	Title:	
Signature: Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.		
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		2823 ::.
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	ANIO: 29

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Compar	ny is:	
• •		
PLUVIA SYSTEMS LLC		
	Liability Company, "L.L.C.," or "LLC,")	
ARTICLE II - Address:		
The mailing address and street address of t	the principal office of the Limited L	iability Company is:
Principal Office Address:	Mailing Address:	
5456 Ginger Cove DR.	5456 Ginger Cove DR.	
APT E	APT E	
Tampa FL 33634	Tampa FL 33634	<u></u>
The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	the registered agent are:	ridual or another
Jose Fernando Gutierrez	Name	
	vanic	
5456 Ginger Cove Dr. A		
Florida street address	(P.O. Box <u>NOT</u> acceptable)	
Tampa	FL 33634	
City	Zip	
	ted in this certificate. I hereby accept capacity. I further agree to comply w plete[performance of my duties, and I	t the appointment as with the provisions of all am familiar with and
		77

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 — Manager	Jose F. Gutierrez
	5456 Ginger Cove Dr. APT E
	Tampa FL 33634
<u> </u>	
	
(Line attackment if meaning)	
(Use attachment if necessary)	
LE V: Other provisions, if any.	. (/
REQUIRED SIGNATURE:	
Signature of a member of	r an authorized representative of a member
	r an authorized representative of a member ce with section 605.0203 (1) (b), Florida Statutes, I am awa
This document is executed in accordance any false information submitted in a doc	r an authorized representative of a member ce with section 605.0203 (1) (b), Florida Statutes, I am awas tument to the Department of State constitutes a third degree
This document is executed in accordance	ce with section 605.0203 (1) (b), Florida Statutes. I am awa
This document is executed in accordance any false information submitted in a doc	ce with section 605.0203 (1) (b), Florida Statutes. I am awa
This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Jose Fernando Gutierrez	ce with section 605.0203 (1) (b), Florida Statutes. I am awa



State of Belaware

SECRETARY OF STATE DIVISION OF CORPORATIONS P.O. BOX 898 DOVER, DELAWARE 19903

9176661 JOSE FERNANDO GUTIERREZ 1000 N WEST ST SUITE 1200 WILMINGTON, DE 19801 01-13-2016

ATTN: PLUVIA SYSTEMS LLC

DESCRIPTION		AMOUNT
003467 - PLUVIA SYSTEMS LLC		
100 Certified Copy		
	Expedite Certified 24 Hour	\$50.00
903467 - PLUVIA SYSTEMS LLC		
Entity Status - Short Form	Certification Fee	\$50.00
	Expedite Fee, 24 Hour	\$40.00
	Expedite ree, 24 nour	340.00
903467 - PLUVIA SYSTEMS LLC		
300 Apostille 1 Copies	Apostille	\$30.00
903467 - PLUVIA SYSTEMS LLC		
100 Certified Copy - 1 Copies	Certification Fee	\$50.00
	Document Page Fee	\$2.00
103467 - PLUVIA SYSTEMS LLC		
300 Apostille 1 Copies		
	Apostille	\$30.00
	TOTAL CHARGES	\$252.00
	TOTAL PAYMENTS	\$252.00 23
	BALANCE	\$0.00
		AMID: 29
		110: 29

UNANIMOUS CONSENT IN LIEU OF ORGANIZATION MEETING OF INCORPORATORS OF

Pluvia Systems LLC

THE UNDERSIGNED, being the authorized agent of the above named Limited Liability Company, a company organized under the laws of the State of Delaware, does hereby adopt the following resolutions:

RESOLVED, that a copy of the Certificate of Formation of this company, which has been filed in the office of the Secretary of State of Delaware, be prefixed to the minutes/operating agreement and that this company proceed to do business there under.

RESOLVED, that the following is designated to constitute the Members/Managers of this company, to hold this position for the ensuing year:

Fernando Gutierrez 630 S. Sapodilla Ave Apt 217 West Palm Beach FL 33401

RESOLVED, that the Members/Managers be and it is hereby authorized to issue the membership certificates of this company to the full amount or number of members authorized by the Certificate of Formation (which may or may not appear in the document) and any amendments added thereto, in such amounts and proportions as from time to time shall be determined by the Member/Manager, and to accept in full or in part payment thereof such property as the Member/Manager may determine shall be good and sufficient consideration and necessary for the business of the company.

RESOLVED, that the Managers/Members be and it is hereby authorized to take any action necessary for the full organization and the conduct of business of the company including, but not limited to, the establishment of bank accounts, and entering into contracts.

AUTHORIZED AGENT:

DELAWARE BUSINESS INCORPORATORS, INC.

BY: KUNELL & Munay V.P.
RUSSELL D. MURRAY, (VICE PRESIDENT

DATE: 12/9/2015

DBI ID: 795169572

Prepared by:

Delaware Business Incorporators, Inc.

302.996.5819







IRS DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

Date of this notice: 03-02-2023

Employer Identification Number: 92-2663561

Form: SS-4

Number of this notice: CP 575 G

PLUVIA SYSTEMS LLC JOSE FERNANDO GUTIERREZ SOLE MBR 6218 BEACON ISLES DR APT 202 TAMPA, FL 33615

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 92-2663561. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Taxpayers request an EIN for their business. Some taxpayers receive CP575 notices when another person has stolen their identity and are opening a business using their information. If you did not apply for this EIN, please contact us at the phone number or address listed on the 'his notice.

it ax documents, making payments, or replying to any related correspondence, not that you use your EIN and complete name and address exactly as shown on may cause a delay in processing, result in incorrect information in your your cause you to be assigned more than one EIN. If the information is own above, please make the correction using the attached tear-off stub and re.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in the notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office:

IMPORTANT REMINDERS:

- Reep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- Refer to this EIN on your tax-related correspondence and documents.
- Provide future officers of your organization with a copy of this notice.

Your name control associated with this EIN is PLUV. You will need to provide this information along with your EIN, if you file your returns electronically.

Safeguard your EIN by referring to Publication 4557, Safeguarding Taxpayer Data: A Guide for Your Business.

You can get any of the forms or publications mentioned in this letter by visiting our website at www.irs.gov/forms-pubs or by calling 800-TAX-PORM (800-829-3676).

If you have questions about your EIN, you can contact us at the phone number or address listed at the top of this notice. If you write, please tear off the stub at the bottom of this notice and include it with your letter.

Thank you for your cooperation.

, (:

Keep this part for your records.

CP 575 G (Rev. 7-2007)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 G

999999999

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 03-02-2023

EMPLOYER IDENTIFICATION NUMBER: 92-2663561

NOROD

FORM: SS-4

INTERNAL REVENUE SERVICE CINCINNATI OH 45999-0023 Edubblich de Aller Herrich de Helbert

PLUVIA SYSTEMS LLC JOSE FERNANDO GUTIERREZ SOLE MBR 6218 BEACON ISLES DR APT 202 TAMPA, FL 33615