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Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corpo				
SUBJECT: New Means E	Education, LLC			
SOBJECT,	(Name of Res	ulting Florida Limit	ed Com	pany)
				I fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return all correspo	ndence concerning	g this matter to:		
Ling Mu				
(C	ontact Person)		_	
New Means Education, LL0				
(F	irm/Company)		-	
3559 Baxter Street				
	(Address)		_	
Jacksonville, FL 32222				
(City,	State and Zip Code)		•	
new.means.education@gm	ail.com			
E-mail Address: (to be use	d for future annual rej	port notifications)	_	
For further information co	oncerning this mat	ter, please call:		
Ling Mu		at (²⁰³	6450	342
(Name of Contact Pe	rson)	(Area Code)	(Day	lime Telephone Number)
Enclosed is a check for the dollars and drawn on a ba	ink located in the	-		ed by this office must be payable in US \$\Begin{align*} \Pi\text{S} & \text{185.00 Filing Fees.} \end{align*}
	Certificate of	and Certified Cop	рy	Certified Copy. and Certificate of Status
Mailing Address:				Address:
New Filing Section				Filing Section
Division of Corporations P.O. Box 6327				on of Corporations entre of Tallahassee
Tallahassee, FL 3	2314			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.

The name of the "Other Business Entity" immediately prior to the filing of the Articl New Means Education, LLC	es of Con	version	is:
(Enter Name of Other Business Entity)	-		
2. The "Other Business Entity" is a			
(Enter entity type. Example: corporation, limited partnership, general partnership, commo	on law or bu	siness tr	ust, etc.)
First organized, formed or incorporated under the laws of	name of th	e countr	- y)
October 16, 2016			
(date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability Company as set forth in the attached Arti	icles of O	rganiza	ation:
New Means Education, 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 9	0 calenda	ir 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 dat document's effective date on the Department of State's records.	e will not b	e listed a	s the
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 appraisable which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	sal rights t	he amo	unt to
		202	
	٠.	2023 KAR	-
	: ;	<u>₩</u>	 : •

Signed this 15 day of March	20 23
Signature of Authorized Representativ	e of Limited Liability Company:
Signature of Authorized Representative: Printed Name; Ling Mu	Title: Manager
	s Entity: See below for required signature(s)
Signature: Printed Name: Mu	Title: Manager
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Di If Directors or Officers have not been select	
If Florida General Partnership or Limit Signature of one General Partner.	ed Liability Partnership:
If Florida Limited Partnership or Limite Signatures of ALL General Partners.	ed Liability Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization:

Certified Copy: Certificate of Status: 023 MAR 21 Pt 6: 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADTRICLERA				
ARTICLE 1 - Name: The name of the Limited Liability Company is	:			
New Means Education, LLC.				
(Must contain the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Li	ability Cor	mpany	is:
Principal Office Address:	Mailing Address:			
3559 Baxter Street	3559 Baxter Street			
Jacksonville, FL 32222	Jacksonville, FL 32222			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	stered Agent. You must designate an indivi	Signatur dual or anothe	re: er	
The name and the Florida street address of the	registered agent are:			
Ling Mu				
Nam	e e			
3559 Baxter Street				
Florida street address (P.C				
Jacksonville	FL 32222			
City	Zip			
Having been named as registered agent and to liability company at the place designated is registered agent and agree to act in this capact statutes relating to the proper and complete accept the obligations of my position as re	n this certificate, I hereby accept city. I further agree to comply wi performance of my duties, and I	the appoin ith the prov am familia	ument c visions or with c	us of all and
Registered Agent's Sig	nature (REQUIRED)		2023	
(CONTIN	NUED)		HAR 21 FF 6:	
			(-) (2)	

Α	R	T	Ĭ	CI	_E	Г	V

The name and address of each person authorized to manage and control the Limited Liability Company:

Name and Address:	
Ling Mu	
3559 Baxter St.	
Jacksonville, FL 32222	
Ping Gui	
3559 Baxter St.	<u> </u>
Jacksonville, FL 32222	
	2823 -
-	
	2
	
	(
	Ling Mu 3559 Baxter St. Jacksonville, FL 32222 Ping Gui

ARTICLE V: Other provisions, if any.

In accordance with Fla. Stat. § 605.0201(3)(a), the undersigned declares that this limited liability company is manager-managed for purposes of Fla. Stat. § 605.0407 and other relevant provisions of the Florida Revised Limited Liability Company Act, Florida Statutes Chapter 605.

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.

> Ling Mu 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)