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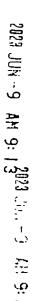
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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Plance 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:		
Contact Person)		
(Firm Company)		
1405 Morathan Key Dr. Apt 203		
Tompa Fl 333012 (City, State and Zip Code)		
E-mail Address: (to boused for future Innual report notifications)		
For further information concerning this matter, please call:		
(Name of Contact Person) at (813) CALOUIU (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)		
☐ \$150.00 Filing Fees (\$25 for Conversion & Status Status ☐ \$180.00 Filing Fees and Certified Copy & Certified Copy & Certificate of Status ☐ \$185.00 Filing Fees & Certified Copy & Certificate of Status ☐ \$185.00 Filing Fees & Certified Copy & Certificate of Status		
Mailing Address:Street Address:New Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of <u>Oktoboro</u> <u>Od.14, 2014</u> (Enter state, or if a non-U.S. entity, the name of the country)
on <u>W. 14, 2014</u> (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Maire Management UC (Enter Name of Florida Limited Liability Company)
(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 day of	ne20_∋3
Signature of Authorized Representat	tive of Limited Liability Company:
Signature of Authorized Representative Printed Name: Laloyette Vlaice	: Jefaff Plan Title: CAUNEC
Signature(s) on behalf of Other Busine	ess Entity: [See below for required signature(s)]
Signature: Latautte Maire	Title:
,	
Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
_	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, If Directors or Officers have not been se	
If Florida General Partnership or Lim Signature of one General Partner.	nited Liability Partnership:
If Florida Limited Partnership or Lim Signatures of <u>ALL</u> General Partners.	nited 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: 2023 J. . - 9 All 9: 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compan	y is:
(Must contain the words "Limited L	Next W. iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of t	he principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
1405 Marathan Key Dr. Suite 303 Tampy Fl 33612	
	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
The name and the Florida street address of	the registered agent are:
Latayette Pla	Name
1405 Numbron Florida street address	(P.O. Box NOT acceptable)
<u> </u>	FL 33617 Zip
Having been named as reciptored agent of	and to account carries of process for the shows stated limit

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 statutes 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.

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Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager AMBR	Latayette Plaire 1405 Marathan Key Dr. Apt DR Taraja FI; 32000
(Use attachment if necessary)	
ARTICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
This document is executed in accordance	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes, I am aware that ument to the Department of State constitutes a third degree felony
lahyette	Service Plaire yped or printed name of signee
	Filing Fees of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Option	of Organization and Designation of Registered Agent nal) \$ 5.00 Certificate of Status (Optional)

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