# 123000281163

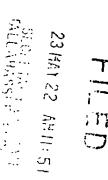
(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200408685132

68/11/17-H01041-KDS \*\*183.63



# **COVER LETTER**

TO: New Filing Sec Division of Cor						
SUBJECT: 6128 Hami	Iton LLC					
<i></i>	(Name of Res	ulting Florida Lin	iited Con	npany)	<del>_</del>	
The enclosed Articles of Business Entity" into a						Other
Please return all correspondences	pondence concerning	g this matter to	:			
Yuri Kaplun						
	(Contact Person)					
	(Firm/Company)	<del></del>	_			
55 SW 9th St., Apt 4506					Fac 23	
	(Address)				23 HAY 22 SEGRA VAS ALLAHASIS	1
Miami, FL 33130			_		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	provident
	y, State and Zip Code)				•••	~~~~
yuri.kaplun@gmail.com		<del></del>	_			
E-mail Address: (to be t	used for future annual rep	port notifications)			ARTH 5	1
For further information	concerning this mat	ter, please call				,
Yuri Kaplun		_at ( <sup>312</sup>	371-6	3570		
(Name of Contact	Person)	(Area Cod	e) (Day	time Telephone Number)	<del></del>	
Enclosed is a check for dollars and drawn on a	_		process	sed by this office must	be payable in	ı US
(\$25 for Conversion a	□\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filin and Certified Co	_	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
Mailing Address New Filing Sectorial Division of Cortain P.O. Box 6327 Tallahassee, FL	tion porations		New I Divisi The C 2415	t Address: Filing Section fon of Corporations Centre of Tallahassee N. Monroe Street, Suit	te 810	

# **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.

1. The name of the "Other Business Entity" immediately prior to the filing of the A KPLN Holdings LLC - 6128 Hamilton Series	Articles of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Limited Liability Company  (Enter entity type. Example: corporation, limited partnership, general partnership, or	common law or business trust, etc.)
First organized, formed or incorporated under the laws of	
08/15/18	
on (date of organization, formation or incorporation)	1 22 7
3. The name of the Florida Limited Liability Company as set forth in the attached	
6128 Hamilton LLC	호텔 <u>파</u>
(Enter Name of Florida Limited Liability Company)	<del></del> ' .*
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 that 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, the document's effective date on the Department of State's records.	han 90 calendar days after
5. The plan of conversion has been approved in accordance with all applicable stat	utes.
<ol> <li>The "Converted or Other Business Entity" has agreed to pay any members having a which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.</li> </ol>	ppraisal rights the amount to

Signed this 16	day of May	20	
Signature of Authori	ized Representative	of Limited Liability Company:	
Signature of Authoriz Printed Name: Mike Kap	ed Representative: _ lun	Title: Manager	_
		Entity: [See below for required signature(s)]	
Signature:	lun	Title: Manager	-
			-
Printed Name:		Title:	- -
Signature:Printed Name:		Title:	- -
Signature:Printed Name:		Title:	23 HAY SECSE I FALLARS
Signature:Printed Name:		Title:	HAY 22 SELECT ANASSE 
Signature:Printed Name:		Title:	- 1 <del>-</del> - 5
If Florida Corporation Signature of Chairman If Directors or Officers	. Vice Chairman, Dire	ector, or Officer. ed. an Incorporator must sign.	<u> </u>
If Florida General Pa Signature of one Gener		d Liability Partnership:	
If Florida Limited Pa Signatures of ALL Ge		Liability Limited Partnership:	
All others: Signature of an authori	zed person.		
Fees:			

Articles of Conversion: \$25.00
Fees for Florida Articles of Organization: \$125.00

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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited L	iability Company is:		
6128 Hamilton LLC (Must contain	the words "Limited Liability	Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and st	reet address of the prit	ncipal office of the Limite	d Liability Company is:
Principal Office Address:	<u>.</u>	Mailing Address:	
55 SW 9th St. Unit 4506 Miami, FL 33130		55 SW 9th St. Unit 4506 Miami, FL 33130	
ARTICLE III - Registere (The Limited Liability Company carbusiness entity with an active Flori The name and the Florida s  Yur Kap	nnot serve as its own Register ida registration.)	red Agent. You must designate an i	individual or another  23 HA1 22  FALLAHASS
55 SW	9th St. Unit 4506		M 1:51
Florid	la street address (P.O.	Box NOT acceptable)	
<b>M</b> iami		FL 33130	7.7
	City	Zip	
liability company at the registered agent and agree statutes relating to the paccept the obligations	ne place designated in the to act in this capacity or oper and complete person of my position as regi	accept service of process for this certificate, I hereby acc y. I further agree to compl erformance of my duties, ar stered agent as provided for ture (REQUIRED)	cept the appointment as ly with the provisions of all nd I am familiar with and

(CONTINUED)

### ARTICLE IV-

as provided for in s.817.155, F.S.

Mike Kaplun

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	VDI Ni Haldinga II C
ANIDH	KPLN Holdings LLC
	55 SW 9th St. Unit 4506
	Miami, FL 33130
MGR	Mike Kaplun
	1028 W Leland Ave.,
	Chicago IL 60640
	TA:
(Use attachment if necessary)	<u> </u>
	유활 -
LE V: Other provisions, if any.	: 
	<del></del>
REQUIRED SIGNATURE:	· •

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)