L23000301358

| (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

| | w Filing Se vision of C | ection orporations | | | | | | | | |
|---|--|---|--------|------------------------------|-------------------------------|---|---------------------|--------------|-------------------|-------|
| SUBJECT | Kykr Brar | nds LLC | | | | | | | | |
| | | (Name of Res | ulting | , Florida Lim | ited Cor | mpany) | | • | | |
| | | of Conversion, Artic a "Florida Limited Li | | _ | | | | | |)ther |
| Please retu | rn all corre | espondence concernin | g this | s matter to: | | | | | | |
| Cameron A | anonsen | | | | _ | | | | | |
| | | (Contact Person) | | | _ | | | | | |
| Kykr Brands | s LLC | | | | | | | | | |
| | | (Firm/Company) | | • | _ | | | | | |
| 288 Ariano | Ave. | | | | | | | | | |
| | | (Address) | | | _ | | | | | |
| Nokomis, F | L 34275 | | | | | | | | | |
| | (C | City, State and Zip Code) | | | _ | | | | | |
| kykrbrands(| @gmail.com | | | | | | | | | |
| E-mail A | ddress: (to be | used for future annual re | port n | otifications) | _ | | | | | |
| For further | informatic | on concerning this ma | iter i | olease call: | | | | | | |
| Cameron A | | ,,, , , , , , , , , , , , , , , , , , | | • | _\ 7249 | 1699 | | | | |
| | me of Contac | et Person) | _at (| .725 (Area Code | _) | ytime Telephone N | Sumber) | | | |
| Enclosed is | s a check fo | or the following amou a bank located in the | , | All checks | , , , | | • | e paya | ble in | US |
| \$150.00 H (\$25 for Con & \$125 for A of Organizati | version articles | □\$155.00 Filing Fees and Certificate of Status | | 180.00 Filin Certified Co | _ | □\$185.00 Filir Certified Copy, Certificate of St | and | | | |
| Nev Div P.C | w Filing Addr w Filing Se vision of Co D. Box 632' lahassee, F | ection orporations 7 | | | New Divis The C 2415 | Et Address: Filing Section Sion of Corporat Centre of Tallah N. Monroe Stre hassee, FL 3230 | assee eet, Suite | ATT AT A 810 | 2023 JUK -8 AH 9: | |

INHS11 (7/17)

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 Art Kykr Brands LLC | icles of Conversion is: |
|---|---------------------------------|
| (Enter Name of Other Business Entity) | <u> </u> |
| 2. The "Other Business Entity" is a S-Corp (Enter entity type. Example: corporation, limited partnership, general partnership, com | mon law or husiness trust etc.) |
| First organized, formed or incorporated under the laws of | |
| 12/11/2018 | |
| (date of organization, formation or incorporation) | |
| 3. The name of the Florida Limited Liability Company as set forth in the attached A | rticles of Organization: |
| Kykr Brands LLC | |
| (Enter Name of Florida Limited Liability Company) | <u> </u> |
| 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 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 document's effective date on the Department of State's records. | 1 90 calendar days after |
| 5. The plan of conversion has been approved in accordance with all applicable statute | s. |
| The "Converted or Other Business Entity" has agreed to pay any members having appr which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. | aisal rights the amount to |
| | 2023 J |

| Signed this 15th day of May | 20_25 |
|--|-------------------------------------|
| Signature of Authorized Representative of Limi | ted Liability Company: |
| Signature of Authorized Representative: Printed Name: Cameron Aanonsen | Title: President |
| Signature(s) on behalf of Other Business Entity: | See below for required signature(s) |
| | |
| Signature: | mid (FC) |
| Printed Name: Constian Ramiscal | Title:CLD |
| Signature: | |
| Printed Name: | Title: |
| | |
| Signature:Printed Name: | Title |
| Fillited Name. | |
| Signature: | |
| Signature:Printed Name: | Title: |
| | |
| Signature:Printed Name: | Title |
| Timed Name. | Title. |
| Signature: | |
| Printed Name: | Title: |
| ICEL CL. Co | |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or | Officer |
| If Directors or Officers have not been selected, an In | |
| | |
| If Florida General Partnership or Limited Liabili | ty Partnership: |
| Signature of one General Partner. | |
| If Florida Limited Partnership or Limited Liabili | ty Limited Partnership: |
| Signatures of ALL General Partners. | - |
| | |
| All others: | |
| Signature of an authorized person. | |
| <u>Fees:</u> | |
| 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 - N The name of the | l ame: Limited Liability | Company is: | | | | |
|---|--|--|--|--------------------------------|---------------------------------|---|
| Kykr Brands LLC | | | | | | |
| (| Must contain the words | s "Limited Liability | Company, "L.L.C.," or "LL | .C.'') | | |
| ARTICLE II The mailing add | | dress of the pri | ncipal office of the L | imited ! | Liabilit | y Company is: |
| Principal Office | e Address: | | Mailing Address: | | | |
| 288 Ariano Ave. | | | 288 Ariano Ave. | | | |
| Nokomis, FL 3427 | 75 | | Nokomis, FL 34275 | | | <u></u> |
| (The Limited Liability business entity with | Company cannot serve an active Florida registr | e as its own Registe ration.) | Office, & Registered agent. You must design egistered agent are: | | | |
| | Cameron Aanor | | _ _ | | | |
| | | Name | | | | |
| | 288 Ariano Ave | • | | | | |
| | Florida street | address (P.O. | Box NOT acceptable | 2) | | |
| | Nokomis | | FL ³⁴²⁷⁵ | | | |
| | | City | Zip | | | |
| liability cor registered age statutes relat | npany at the place nt and agree to ac ing to the proper o obligations of my | e designated in t in this capaci and complete p position as reg | accept service of proceed this certificate, I hereingty. I further agree to consider the error of my duticate agent as provided agent as provided the error of th | by accep comply les, and | ot the a with the I am fa | ppointment as e provisions of all miliar with and |
| | | (CONTINU | J ED) | | <u>;;</u> | 8 |

ARTICLE IV-

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

| HANADDR A AL 1 LAA | | |
|--|--|----------------|
| "AMBR" = Authorized Member | | |
| "MGR" = Manager | C | |
| AMBR | Cameron Aanonsen | |
| | 288 Ariano Ave. | |
| | Nokomis, FL 34275 | |
| MCB | Christian Ramiscal | |
| MGR | | - |
| | 686 Roosevelt Blvd | |
| | Paramus NJ 07562 | |
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| <u> </u> | | |
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| (Use attachment if necessary) | | |
| (Use attachment if necessary) | | |
| (Use attachment if necessary) LE V: Other provisions, if any. | | |
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| LE V: Other provisions, if any. | | |
| LE V: Other provisions, if any. | | |
| LE V: Other provisions, if any. REQUIRED SIGNATURE | or an authorized representative of a | mambar |
| REQUIRED SIGNATURE Signature of a member | or an authorized representative of a | |
| REQUIRED SIGNATURE Signature of a member of this document is executed in accordance. | nce with section 605.0203 (1) (b), Florida Statu | ites. I am awa |
| REQUIRED SIGNATURE Signature of a member of this document is executed in accordance. | | ites. I am awa |
| Signature of a member of this document is executed in accordate any false information submitted in a document as provided for in s.817.155, F.S. | nce with section 605.0203 (1) (b), Florida Statu | ites. I am awa |
| Signature of a member This document is executed in accorda any false information submitted in a do as provided for in s.817.155, F.S. Cameron Aanonsen | nce with section 605.0203 (1) (b), Florida Statuceument to the Department of State constitutes | ites. I am awa |
| Signature of a member This document is executed in accorda any false information submitted in a do as provided for in s.817.155, F.S. Cameron Aanonsen | rice with section 605.0203 (1) (b), Florida Statuscument to the Department of State constitutes Typed or printed name of signee | ites. I am awa |
| Signature of a member of any false information submitted in a do as provided for in s.817.155, F.S. Cameron Aanonsen | nce with section 605.0203 (1) (b), Florida Statuceument to the Department of State constitutes | a third degree |