L23000328041

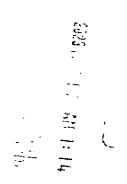
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





300402194503

02/15/23--01017--007 **150.00







March 7, 2023

FORREST STANLEY 3203 W PALMETTO ST TAMPA, FL 33607 US

SUBJECT: TUNDRALIFE INVESTMENTS, INC.

Ref. Number: W23000031174

We have received your document for and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

If you have any further questions concerning your document, please call (850) 245-6052.

KAIN COSTELLO Regulatory Specialist II New Filing Section

Letter Number: 723A00005263

3/17/23



COVER LETTER

.

	ng Section of Corporations		
	draLife Investments, Inc		
SUBJECT:	(Name of Re	esulting Florida Limi	ted Company)
		-	on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all	correspondence concernir	ng this matter to:	
Forrest Stanley			
	(Contact Person)		-
	(Firm/Company)		-
3203 W. Palmetto	Street		_
	(Address)		
Tampa, FL 33607			
	(City, State and Zip Code)		-
justin21998@yah	oo.com		
E-mail Address:	(to be used for future annual re	eport notifications)	-
For further infor	mation concerning this ma	atter, please call:	
Forrest Stanley		at (813	389-5125
(Name of	Contact Person)		(Daytime Telephone Number)
	eck for the following amor n on a bank located in the	•	processed by this office must be payable in US
■ \$150.00 Filing F (\$25 for Conversion & \$125 for Articles of Organization)		□\$180.00 Filing and Certified Cop	
Division P.O. Box	ng Section of Corporations		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: TundraLife Investments, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation (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)
July 13, 2022 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:
Tundra Life Investments, 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.

If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person.	Signed this day of February	20 <u> み</u> ろ
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature: Printed Name: Forest E. Stanley Title: President Signature: Printed Name: Title: Signature of Chairman, Vice Chairman, Director, or Officer, If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person.		
Signature: Printed Name; Forrest E. Steriley Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Signature: Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partners. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:	Signature of Authorized Representative: Printed Name: Forrest E. Stanley	Title: Managing Member
Signature: Printed Name: Title: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer, If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partners. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:	Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Printed Name: Title: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer, If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partners. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:	Signature: Signature:	
Printed Name:	Printed Name: Forrest E. Stanley	Title: President
Printed Name:	Signature:	
Signature: Printed Name: Signature: Printed Name: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature: Printed Name: Title: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:	Printed Name:	Title:
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Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:		
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Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:	If Florida Limited Partnership or Limited Liabili	ty Limited Partnership
Signature of an authorized person. Fees:	Signatures of <u>ALL</u> General Partners.	sy isimica i accierming.
Fees:	All others:	
	Signature of an aumorized person.	
Articles of Conversion: \$25.00	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 Liability Company	is:	
Tundra Life Investments, LLC		
(Must contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limit	ed Liability Company is:
Principal Office Address:	Mailing Address:	
3203 W. Palmetto Street Tampa, FL 33607	Same	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Region business entity with an active Florida registration.)		
The name and the Florida street address of the	e registered agent are:	
Frank Miranda		
Nai	me	
3226 W. Cypress Street		
Florida street address (P.	O. Box NOT acceptable)	
Tampa —	FL 33607	
City	Zip	
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as i	in this certificate, I hereby a acity. I further agree to comp e performance of my duties, a	ecept the appointment as ply with the provisions of all and I am familiar with and
(CONTI	1 INUED)	2023

ARTICLE IV-

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

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Forrest E.Stanley
	3203 W. Palmetto Street
	Tampa, FL 33607
AMBR	Wilda Stanley
	3203 W. Palmetto Street
	Tampa, FL 33607
	
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(Use attachment if necessary)	
(Ose attachment if necessary)	
ZI E V. Other provisions if and	
CLE V: Other provisions, if any.	
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DEALIDED CLONATUDE	
REQUIRED SIGNATURE:	
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Force (+ I. Stanley
Typed of 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)

any false information submitted in a document to the Department of State constitutes a third degree felony