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



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| SUBJ | ECT: JP-TRAI | DE LLC | | | | | | |
| 50 D 6 | | | sulting Florida Limi | ed Cor | npany) | | | |
| | | | | | d fees are submitted to coordance with s. 605. | | | ther |
| Please | return all corn | espondence concernin | g this matter to: | | | | | |
| MIKHA | AIL MULLAIANC | νV | | | | | | |
| | | (Contact Person) | | | | | | |
| JP-TR | ADE LLC | | | | | (C) | 202 | |
| | | (Firm/Company) | | | | 금당 | نٽ | et- |
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| | | City, State and Zip Code) | | - | | الله الله (2) | င္မာ | ` |
| 2droos | ۰) .strading@gmail | • | | | | | ر 1 | |
| | | e used for future annual re | nort notifications) | - | | | | |
| | | | | | | | | |
| For fu | rther informati | on concerning this ma | tter, please call: | | | | | |
| MIKHA | AIL MULLAIANC |)V | at (⁵⁰³ | 816- | 1546 | | | |
| | (Name of Conta | ect Person) | | (Day | time Telephone Number) | | | |
| | | or the following amou a bank located in the | | rocess | sed by this office must | be payat | ole in I | US |
| (\$25 fo: & \$125 | 0.00 Filing Fees r Conversion for Articles nization) | □\$155.00 Filing Fees and Certificate of Status | □\$180.00 Filing and Certified Cop | | ☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status | | | |
| | Mailing Add New Filing S Division of C | ection orporations | | New Divis | t Address: Filing Section ion of Corporations 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 <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: JP-TRADE LLC |
|---|
| (Enter Name of Other Business Entity) |
| 2. The "Other Business Entity" is a LLC |
| (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc |
| First organized, formed or incorporated under the laws ofOREGON |
| (Enter state, or if a non-U.S. entity, the name of the country) |
| 12/01/2022 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: JP-TRADE 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.

| Signed this 11 day of JULY | 20.23 |
|---|---|
| Signature of Authorized Representa | tive of Limited Liability Company: |
| Signature of Authorized Representative Printed Name: MIKHAIL MULLAIANOV | e: MIKHAIL MULLAIA NOV Title: MANAGER |
| Signature(s) on behalf of Other Busine | ess Entity: [See below for required signature(s)] |
| Signature: MIKHAIL MULLA | IAUOV |
| Printed Name: MIKHAIL MULLAIANOV | Title: MANAGER |
| Signature: | Title: |
| Printed Name: | Title: |
| Signature: | |
| Printed Name: | Title: |
| Signature: | |
| Printed Name: | Title: |
| | |
| Printed Name: | Title: |
| | |
| Printed Name: | Title: |
| | |
| If Florida Corporation: Signature of Chairman, Vice Chairman, | Director of Officer |
| If Directors or Officers have not been se | |
| | |
| If Florida General Partnership or Lim Signature of one General Partner. | ited Liability Partnership: |
| Signature of one General Parties. | |
| If Florida Limited Partnership or Lim Signatures of <u>ALL</u> General Partners. | ited 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 JUL 19 NH 8: 1,0

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| | Name: | | |
|----------------------------|----------------------------------|---|--------------------------|
| The name of the | : Limited Liability Compa | any is: | |
| JP-TRADE LLC | | | |
| | (Must contain the words "Limited | Liability Company, "L.L.C.," or "LLC.") | - · · · · · · |
| | | | |
| ARTICLE II The mailing add | | f the principal office of the Limite | ed Liability Company is: |
| Principal Office | e Address: | Mailing Address: | |
| 1100 Cleveland S | St Apt 101 | 1100 Cleveland St Apt 10 | 1 |
| Clearwater, FL 33 | 3755 | Clearwater, FL 33755 | |
| | | _ | |
| business entity with | an active Florida registration.) | on Registered Agent. You must designate an of the registered agent are: | individual or another |
| | | Name | |
| | 1100 Cleveland St Apt | 101 | |
| | Florida street addres | ss (P.O. Box <u>NOT</u> acceptable) | |
| | Clearwater | FL ³³⁷⁵⁵ | |
| | City | Zip | |
| | | | |

(CONTINUED)

ARTICLE IV-

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

| "AMBR" = Authorized Member | |
|--|---|
| 'MGR" = Manager MGR | MIKHAIL MULLAIANOV |
| | 1100 Cleveland St Apt 101 |
| | Clearwater, FL 33755 |
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| Use attachment if necessary) | |
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| E.W. Od. and data at 16 | , <u>F</u> |
| LE V: Other provisions, if any. | |
| | |
| | |
| REQUIRED SIGNATURE: | |
| | 1 |
| MIKHAIC | MULIAIANOV |
| Signature of a member or an | authorized resumentative of a member |
| This document is executed in accordance with | authorized representative of a member in section 605.0203 (1) (b), Florida Statutes, I am awat to the Department of State constitutes a third degre |
| MIKHAIL MULLAIANOV | |
| Typod | or printed name of signee |
| 1 yped | Filing Fees |

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)