L23000391208

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

Office Use Only



400413248114

98/21/23--91001--013 **180.00

FALLAHASSEE, FILM

THOE VED

CORPORATE When you need ACCESS to the world ACCESS, ____

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

| PICK UP: RTIFIED COPY OTOCOPY ING | |
|--------------------------------------|---------------------|
| OTOCOPY _ | |
| 5 _ | |
| - | |
| ING | |
| | CONVERSION |
| - GOLD AND SILVER | D RDOKEDS II C |
| TE NAME AND DOCUMENT | |
| | |
| ATE NAME AND DOCUMENT | ``#) |
| | |
| TE NAME AND DOCUMENT | `#\ |
| TE WANTE AND DOCUMENT | #) |
| | |
| TE NAME AND DOCUMENT | *#) |
| | |
| TE NAME AND DOCUMENT | `#) |
| | |
| | |
| | E NAME AND DOCUMENT |

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.

| Statutes. | |
|--|--|
| 1. The name of the "Other Business Entity" immediately pri | or to the filing of the Articles of Conversion is: |
| (Enter Name of Other Business En | tity) |
| 2. The "Other Business Entity" is a Limited Liability Company | ship, general partnership, common law or business trust, etc.) |
| | |
| First organized, formed or incorporated under the laws of | state, or if a non-U.S. entity, the name of the country) |
| 09/14/2022 on | and on the first of the state of the country) |
| (date of organization, formation or incorporation) | |
| 3. The name of the Florida Limited Liability Company as se | forth in the attached Articles of Organization: |
| C&M GOLD AND SILVER BROKERS LLC | |
| (Enter Name of Florida Limited Liability C | ompany) |
| 4. If not effective on the date of filing, enter the effective da | |
| (The effective date: Cannot be prior to date of receipt or the date this document is filed by the Florida Department Note: If the date inserted in this block does not meet the applicable statu document's effective date on the Department of State's records. | of State.) |
| 5. The plan of conversion has been approved in accordance v | vith all applicable statutes. |
| 6. The "Converted or Other Business Entity" has agreed to pay which such members are entitled under ss. 605.1006 and 605 | |
| | |
| | |

| Signa | ture of Authorized Representative of Limi | ited Liability Company: | |
|---|---|--|-------|
| Signat Printed | ture of Authorized Representative: \text{\text{TY} (U)} d Name: Margarite Zapatka | carito Zupatka | |
| Signat | ture(s) on behalf of Other Business Entity: | See below for required signat | ure(s |
| Signat | ure: Marovarite 2000 | tto | |
| Printe | d Name: Margante Zapatka | Title: Member | |
| Signat | ure: | | |
| Printe | d Name: | Title: | |
| Signat | ure: | | |
| Printed | ure: d Name: | Title: | |
| | | | |
| Printed | ure:d Name: | Title: | |
| | | | |
| Signat Printed | ure:d Name: | Title: | |
| | | | |
| o. | | | |
| Printed <u>If Flor</u> Signat | ure: d Name: rida Corporation: ure of Chairman, Vice Chairman, Director, or | Title:Officer. | |
| Printed If Flow Signat If Direct If Flow | rida Corporation: ure of Chairman, Vice Chairman, Director, or ectors or Officers have not been selected, an Increde Chairman Partnership or Limited Liabili | Officer. | |
| Printed If Floi Signat If Floi Signat If Floi Signat All otl | rida Corporation: ure of Chairman, Vice Chairman, Director, or ectors or Officers have not been selected, an Incrida General Partnership or Limited Liabili ure of one General Partner. rida Limited Partnership or Limited Liabili ures of ALL General Partners. hers: | Officer. corporator must sign. ty Partnership: | |
| Printed If Flor Signat If Dire Signat Signat If Flor Signat Signat All otl Signat | rida Corporation: ure of Chairman, Vice Chairman, Director, or ectors or Officers have not been selected, an Incrida General Partnership or Limited Liabili ure of one General Partner. rida Limited Partnership or Limited Liabili ures of ALL General Partners. | Officer. corporator must sign. ty Partnership: | |
| Printed If Floi Signat If Floi Signat If Floi Signat All otl | rida Corporation: ure of Chairman, Vice Chairman, Director, or ectors or Officers have not been selected, an Incrida General Partnership or Limited Liabili ure of one General Partner. rida Limited Partnership or Limited Liabili ures of ALL General Partners. hers: | Officer. corporator must sign. ty Partnership: | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: | |
|--|--|
| C&M GOLD AND SILVER BROKERS LLC (Must contain the words "Limited Liability Contains the words "Liability Contains the words "Liabilit | omnony "LLC " or "LLC ") |
| (Musi contain the words Elimited Elaolity C | ompany. L.L.C., or LLC.) |
| ARTICLE II - Address: The mailing address and street address of the principle. | cipal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 6061 2nd St. E # 34 | 5061 2nd St. E # 34 |
| St Pete Beach, FL 33706 | St Pete Beach, FL 33706 |
| | |
| ARTICLE III - Registered Agent, Registered Of The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.) The name and the Florida street address of the registered Agents Inc. | d Agent. You must designate an individual or another |
| Name | |
| | |
| 7901 4th St. N, STE 300 Florida street address (P.O. B | Dy NOT acceptable) |
| riolida street address (r.O. D | ox <u>NOT</u> acceptable) |
| St. Petersburg | FL 33702 |
| City | Zip |
| liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete per, | ccept service of process for the above stated limited is certificate. I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 605, F.S |
| (CONTINUE | (D) |

| Company: | |
|---|---|
| <u>Title:</u> | Name and Address: |
| "AMBR" = Authorized Member | |
| "MGR" = Manager AMBR | Chris Zapatka |
| <u> </u> | 6061 2nd St. E # 34 |
| | St Pete Beach, FL 33706 |
| | i |
| AMBR | Margarite Zapatka |
| | 6061 2nd St E # 34 St Pete Beach, FL 33706 |
| | orr eta beadi, r c 33700 |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| (Use attachment if necessary) | |
| | |
| | |
| REQUIRED SIGNATURE: | |
| Marinom rite 2 | and the |
| Margareto Zu | parca |
| This document is executed in accordance | nn authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware next to the Department of State constitutes a third degree f |
| Margante Zapatka | |
| Тур | ped or printed name of signee |
| | Filing Fees |
| \$ 30.00 Certified Copy (Options | |
| | |
| 1 | f Organization and Designation of Registered al) S 5.00 Certificate of Status (Option |
| | |
| 1 | |
| 1 | |
| 1 | |
|] | |

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

ARTICLE IV-