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PICK-UP	MAIT	MAIL
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Certified Copies	Certificates o	of Status
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Special Instructions to Fi	ting Officer:	

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CHATHAM



CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

		1
AUCTUS CAPITAI	_ GROUP CORP	
Please Debit FCA000	0000003 For: 150	
Thank you Seth Neel	ley	
At 13/		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
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		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
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		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
/ .		Officer Search
A		Fictitious Search
Signature		Fictitious Owner Search
		Vehicle Search
	· 	Driving Record
Requested by:		UCC 1 or 3 File
Name	Date Time	UCC 11 Search
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Walk-In	Will Pick Up	Courier

COVER LETTER

	New Filing Se Division of C					
SHRIE	CT. AUCTUS	CAPITAL GROUP COP	RP			
JOBJE		(Name of Res	ultinį	g Florida Limi	ted Com	npany)
						d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please 1	return all corre	espondence concerning	g thi	s matter to:		
Teresa	De La Rosa					
		(Contact Person)			-	
Teresa	L De La Rosa,	C.P.A., P.A				
		(Firm/Company)			_	
814 Por	nce De Leon Bl	vd, Suite 204				
		(Address)			_	
Coral G	ables, FL 3313	4				
	((City, State and Zip Code)	_		_	
lisbette	@delarosacpaf	irm.com				
E-ma	il Address: (to b	e used for future annual rep	ort r	notifications)	-	
For furt	ther information	on concerning this mat	ter,	please call:		
Teresa	De La Rosa		at	(305	385-1	1099
	(Name of Conta	ct Person)) (Day	time Telephone Number)
		or the following amou a bank located in the			process	ed by this office must be payable in US
(\$25 for	00 Filing Fees Conversion or Articles ization)	S155.00 Filing Fees and Certificate of Status		\$180.00 Filing I Certified Co		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
	Mailing Addi New Filing So Division of C P.O. Box 632 Tallahassee, F	ection orporations 7			New F Divisi The C	Address: Filing Section on of Corporations entre of Tallahassee 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: AUCTUS CAPITAL GROUP CORP
(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
04/05/2023
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
AUCTUS CAPITAL GROUP 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 30	0 day of <u>August</u>	20_23		
Signature of	Authorized Representative of Lim	ited Liability Company:		
Signature of A	Authorized Representative:Geum	an Mesa Title: AMBR		
Printed Name:	German Mesa	Title: AMBR		
Signature(s) o	on behalf of Other Business Entity:	[See below for required signature(s)]		
Signature	German Mesa			
Printed Name:	German Mesa German Mesa	Title: AMBR		
Ciamatama				
Printed Name:		Title:		
Signature: Printed Name:		Title:		
Signature:				
Printed Name:		Title:		
Signature:		Title:		
Printed Name:	<u> </u>	Title:		
Signature:				
Printed Name:		Title:		
If Florida Cor	rnaration:			
	Chairman, Vice Chairman, Director, or	Officer.		
	Officers have not been selected, an In			
If Florida Cer	neral Partnership or Limited Liabili	ity Partnership		
	ne General Partner.	ry rattices sup.		
TO Promise a file	orand Brooks and the condition of the tand I to be the	And I though all Donates and I		
	<u>nited Partnership or Limited Liabili</u> ALL General Partners.	ty Limited Partnership:		
-				•
All others:				1
Signature of a	n authorized person.		<u>.</u>	
Fees:			Θ.	;
A 2 1	an of Communication	\$25.00	5	
	es of Conversion: or Florida Articles of Organization:	\$25.00 \$125.00	7	
	ied Copy:	\$30.00 (Optional)		
	icate of Status:	\$5.00 (Optional)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na				
The name of the L	imited Liability Company	is:		
AUCTUS CAPI	TAL GROUP LLC			
(M	ust contain the words "Limited Lial	oility Compan	/, "L.L.C.," or "LLC.")	
ARTICLE II - Ac The mailing addre	ddress: ss and street address of the	principal (office of the Limited L	iability Company is:
Principal Office A	Address:	<u>Maili</u>	ng Address:	
808 Brickell Key D Miami, FL 33131	Pr Unit 2706	808 I Miai	Brickell Key Dr Unit 270 mi, FL 33131	<u>)6</u>
(The Limited Liability C	Registered Agent, Register Company cannot serve as its own Re- active Florida registration.)			
The name and the	Florida street address of th	ie registere	d agent are:	
	German Mesa			
	Na	ime		
	808 Brickell Key D	r Unit 270	5	233
	Florida street address (F	P.O. Box <u>N</u>	OT acceptable)	्यः ६५ १ - मु
	Miami	FL	33131	1
	City		Zip	770
liability comp registered agent statutes relatin	med as registered agent and pany at the place designated and agree to act in this cap by to the proper and comple pligations of my position as	l in this cer pacity. I fur te perform	tificate, I hereby accept ther agree to comply w ince of my duties, and I	t the appointment as with the provisions of all am familiar with and
	German	Mesa		
	Registered Agent's S	ignature (F	REQUIRED)	
	(CONT	INUED)		

ARTICLE IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized I	ember
"MGR" = Manager	
AMBR	German Mesa
	808 Brickell Key Dr Unit 2706
	Miami, FL 33131
AMBR	Adrien Battistolo
	Carrera 20 #20 Sur 44
	Medellin, Colombia
AMBR	Carlos Mesa
	Carrera 25 #3 B 60APT
	Medellin, Colombia
Use attachment if neces LE V: Other provisions,	
	<u>.</u>
	RE:
<u>REQUIRED</u> SIGNATU	

German Mesa

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)