# L23000439148

(Re	questor's Name)	
DA)	dress)	·
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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### **COVER LETTER**

TO:	New Filing So Division of Co						
SUBJ	ECT. GROOVE	E SOCIETY, LLC.					
зова	EC1		ulting Florida Limi	ted Com	ipany)	_	
Busin	ess Entity" into	a "Florida Limited Li	ability Compan		d fees are submitted to decordance with s. 605.10		'Other
Please	return all corre	espondence concerning	g this matter to:				
MICH	AEL DELGADO						
		(Contact Person)					
		(Firm/Company)		_			
1100 [	BRICKELL BAY	DR #310784					
		(Address)		_			
MIAM	l, FL 33131						
	(0	City, State and Zip Code)		-			
MD@	VICEVENTURES	S.NET					
E-n	nail Address: (to b	e used for future annual re	port notifications)	_			
For fu	rther information	on concerning this ma	tter, please call:				
MICH.	AEL DELGADO		_at (305	<sub>\</sub> 970-3	3516		
	(Name of Conta	ct Person)	(Area Code	_ <i>/</i> ) (Day	time Telephone Number)	-	
		or the following amou a bank located in the		process	sed by this office must b	oe payable i	in US
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles anization)	\$155.00 Filing Fees and Certificate of Status	S180.00 Filing and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
	Mailing Add New Filing So Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New I Divisi The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite nassee, FL 32303	810 	2022 SE: 18 PH 1:

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 Articles of Conversion is: GROOVE SOCIETY, 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
02/10/2020
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: GROOVE SOCIETY, 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.
2022 SEF

Signed this 11TH	day of <u>SEPTEMBER</u>	20 <u>23</u>		
Signature of Author	rized Representative of Lim	ited Liability Company:		
Signature of Authori Printed Name: MICHA	zed Representative:	Title: PRESIDENT		
Signature(s) on beha	alf of Other Business Entity:	[See below for required signature(s)]		
Signature:		Title:		
Signature:		Title:		
Printed Name:		Title:		
Signature:				
Printed Name:		Title:		
Signature:				
Printed Name:		Title:		
Signature:		m. I		
Printed Name:		Title:		
Signature:		m: 1		
Printed Name:		Title:		
If Florida Corporation	on:			
Signature of Chairman	n, Vice Chairman, Director, or	Officer.		
If Directors or Officer	s have not been selected, an In-	corporator must sign.		
<u>If Florida General P</u>	artnership or Limited Liabili	ty Partnership:		
Signature of one Gene	eral Partner.			
<b>If Florida Limited Pa</b> Signatures of <u>ALL</u> Ge	artnership or Limited Liabili eneral Partners.	y Limited Partnership:		
All others: Signature of an author	ized person.			
Fees:				
Articles of Co Fees for Flori Certified Cop Certificate of	da Articles of Organization: y:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	ALL TASE	2022 SEF 18
			-	<u> </u>
			- <u>3</u>	l: 56
				-

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Con-	ipany is:
GROOVE SOCIETY, LLC.	
(Must contain the words "Limi	ted Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	of the principal office of the Limited Liability Company is:
and the second s	of the principal office of the Elithted Elaothty Company is.
Principal Office Address:	Mailing Address:
1100 BRICKELL BAY DR	1100 BRICKELL BAY DR
#310784	#310784
MIAMI, FL 33131	MIAMI, FL 33131
ADTICLE III Destant Access	La Lore o P. L. La de
(The Limited Liability Company cannot serve as its	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
business entity with an active Florida registration.)	
The name and the Florida street address	s of the registered agent are:
	•
MICHAEL DELGADO	
	Name
1100 BRICKELL BAY	/ DR #310784
<del></del>	ess (P.O. Box NOT acceptable)
MIAMI	FL <sup>33131</sup>
City	Zip
Uming been named to make the	
lighility company at the place desir	ent and to accept service of process for the above stated limited gnated in this certificate, I hereby accept the appointment as
registered agent and agree to act in the	gradied in this certificate, I hereby accept the appointment as its capacity. I further agree to comply with the provisions of all
statutes relating to the proper and co	omplete performance of my duties, and I am familiar with and
accept the obligations of my positi	on as registered agent as provided for in Chapter 605, F.S
	g v i in again as provinciajor in chapter ous, r isi.
	$(   \setminus )$
<del></del>	
Registered Age	nt's Signature (REQUIRED)

(CONTINUED)

### ARTICLE IV-

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

<u>SADO</u>	
BAY DR #310784	
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) (b) Florida Statutes Las	m auvara ti
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of signee	
or pignee	
t o	e of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)