22000472257

(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
,

Office Use Only



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S. CHATHAM ULI 16 2023

RECEIVED

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

DATE10/13/2023	**WALK IN*
entity name <mark>KAIH</mark>	AN, LLC
DOCUMENT NUMBER	₹
	PLEASE FILE THE ATTACHED AND RETURN
	Plain Copy
XXXXXXXXX	Certified Copy
XXXXXXXX	Certificate of Status
	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY
	Certified Copy of Arts & Amendments
	Certified Copy of Arts & Amendments Complete File (Including Annual Reports)
	Certificate of Status
	Certificate of Status Reflecting:
	APOSTILLE' / NOTARIAL CERTIFICATION
COUNTRY OF DESTINA	1770N
NUMBER OF CERTIFICA	ATES REQUESTED
TOTAL OWED \$ 185.0	00 ACCOUNT # 120160000072 W: C > W
Please call Tina at	the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: New Filing S Division of C				
SUBJECT: Kaihan,	LLC			
	(Name of Re	sulting Florida Limi	ted Con	npany)
				d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:		
Kaihan Krippendorff				
	(Contact Person)		=	
Outthinker Strategy Ne	etwork			
	(Firm/Company)		-	
6121 SW 104th Street				
	(Address)		-	
Pinecrest, FL 33156				
((City, State and Zip Code)		•	
kaihan@outthinker.com	n			
E-mail Address: (to b	e used for future annual re	port notifications)	-	
For further information	on concerning this ma	tter, please call:		
Gregg J. Lallier, Esq.		_at (at (786-8	3313
(Name of Conta	ct Person)	(Area Code)	(Day	time Telephone Number)
	or the following amou a bank located in the		rocess	sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$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 So Division of C P.O. Box 632	ection orporations		New I Divisi	Address: Filing Section on of Corporations entre of Tallahassee
Tallahassee, I				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: Kaihan, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a limited liability company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
(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)
April 27, 2021
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Kaihan, 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 locument'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 12th day of October	20 <u>23</u>	
Signature of Authorized Representative of Limi	ted Liability Company:	
Company to Educate Frie	rendorff	
Signature of Authorized Representative:	Title: Member	
Timed Tunes		
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)	
Signature: kallan krippendorff		
Printed Name: Kaihan Krippendorff		
Signature:Printed Name:	Title	
Frinted Name.	True.	
Signature:Printed Name:		
Printed Name:	Title:	
Signature:		
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title	
rimed Name.		
Signature:Printed Name:		
Printed Name:	Title:	
If Florida Corporation:		
Signature of Chairman, Vice Chairman, Director, or		
If Directors or Officers have not been selected, an Inc	corporator must sign.	
If Florida General Partnership or Limited Liabili	ty Partnership:	
Signature of one General Partner.		
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	
All others:		;~ <u>;</u>
Signature of an authorized person.		C_1
P.		<u>.</u>
<u>Fees:</u>		
Articles of Conversion:	\$25.00	22
Fees for Florida Articles of Organization:	\$125.00	
Certified Copy:	\$30.00 (Optional)	7:28
Certificate of Status:	\$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compa	iny is:
Kaihan, LLC	
(Must contain the words "Limited	Liability Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Address: The mailing address and street address of Principal Office Address:	the principal office of the Limited Liability Company is: Mailing Address:
10 Ricki-Beth Lane	10 Ricki-Beth Lane
Old Greenwich, CT 06870	Old Greenwich, CT 06870
ARTICLE III - Registered Agent, Regis	stered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

The name and the Florida street address of the registered agent are:

business entity with an active Florida registration.)

Kaihan Krippendorff		547
-	Name	
6121 SW 104th Street		• • • • • • • • • • • • • • • • • • •
Florida street addres	ss (P.O. Box NOT acceptable)	
Pinecrest	FL 33156	
City	Zip	28

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..



(CONTINUED)

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

<u>Γitle:</u>	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager AMBR	Kaihan Krippendorff
HIVIDIX	6121 SW 104th Street
	Pinecrest, FL 33156
	,
	
Use attachment if necessary)	
LE V: Other provisions, if any.	
	<u> </u>
teaile	isigned by. an Enppendorff
Signature of a member or	an authorized representative of a member ewith section 605.0203 (1) (b), Florida Statutes. I am aware
This document is executed in accordance	iment to the Department of State constitutes a third degree fo
This document is executed in accordance any false information submitted in a docu as provided for in s.817.155. F.S. Kaihan Krippendorff	iment to the Department of State constitutes a third degree fi
This document is executed in accordance any false information submitted in a docu as provided for in s.817.155. F.S. Kaihan Krippendorff	iment to the Department of State constitutes a third degree fo