L23000517688

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 137886 8433325

AUTHORIZATION :

COST LIMIT : \$ 150 0

ORDER DATE: November 17, 2023

ORDER TIME : 1:28 PM

ORDER NO. : 137886-010

CUSTOMER NO: 8433325

DOMESTIC AMENDMENT FILING

NAME: GOOD ONE GLOBAL CORE LLC

EFFECTIVE DATE:

XX ARTICLES OF CONVERSION AND ORGANIZATION RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER'S INITIALS:

COVER LETTER

TO:	New Filing S Division of C				
SUB.	JECT: Good O	ne Global Core LLC			
000	,		sulting Florida Limi	ed Cor	npany)
			_		nd fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Pleas	e return all corr	espondence concernin	g this matter to:		
Emilio	o Gutierrez				
		(Contact Person)		•	
FA C	orporate Manage	ement LLC			
		(Firm/Company)			
2050	Coral Way Ste 4	05			
	<u> </u>	(Address)		•	
Miam	ii, FL 33145				
	(1	City. State and Zip Code)		•	
Legal	2@facorporatem	ng.com			
E-1	mail Address: (to b	oe used for future annual re	port notifications)		
For fu	urther informati	on concerning this ma	tter, please call:		
Emilio	o Gutierrez		_at (761-	6978
	(Name of Conta	act Person)		(Day	rtime Telephone Number)
		for the following amou a bank located in the		roces	sed by this office must be payable in US
(\$25 fo & \$12.	50.00 Filing Fees or Conversion 5 for Articles anization)	☐\$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 P.O. Box 632	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"

nto

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: Good One Global Core 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)
01/28/2013 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:
Good One Global Core 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 2nd	day of October	2023
Signature of Autho	rized Representative of Lin	nited Liability Company:
Signature of Authori Printed Name: <u>Patrick</u>	zed Representative:	Title: Manager
Signature(s) on beha	alf of Other Business Entity:	[See below for required signature(s)]
Signature:	3	
Printed Name: Patrick	Powers	Title: Manager
Signature: Printed Name:		Title:
Signature:		
		Title:
Printed Name:		Title:
Signature:		
Printed Name:		Title:
	on: n, Vice Chairman, Director, o rs have not been selected, an I	
If Florida General P Signature of one Gen	<mark>artnership or Limited Liabi</mark> eral Partner.	lity Partnership:
If Florida Limited P Signatures of ALL G	artnership or Limited Liabi eneral Partners.	lity Limited Partnership:
All others: Signature of an autho	rized person.	
Fees:		
Articles of Co Fees for Flori Certified Cop Certificate of	ida Articles of Organization: by:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited L	iability Company	is:	
Good One Global Core LLC			
(Must contain	the words "Limited Liah	ility Company, "L.L.C.," or "LI	.C.")
ARTICLE II - Address: The mailing address and st	reet address of the	principal office of the L	imited Liability Company is:
Principal Office Address:	•	Mailing Address:	
2050 Coral Way Ste 405, Mia	ami, FL 33145	2050 Coral Way Ste	405, Miami, FL
		33145	
The name and the Florida s	treet address of the RPORATE MANAGE Na	EMENT LLC	
	oral Way Ste 405	O. D. NOT.	
riorid	a street address (P	O. Box <u>NOT</u> acceptable	e)
Miami 		FL 33145	
	City	Zip	
liability company at the registered agent and agre statutes relating to the p accept the obligations	e place designated te to act in this cap proper and complet t of my position as i	I in this certificate. I here acity. I further agree to be performance of my dut	cess for the above stated limited by accept the appointment as comply with the provisions of all ies, and I am familiar with and ded for in Chapter 605, F.S
Reg	gistered Agent's Si	gnature (REQUIRED)	

(CONTINUED)

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 Member	
"MGR" = Manager	
MGR	Brian Powers
	2050 Coral Way Ste 405, Miami, FL 33145
MGR	Jim Powers
	2050 Coral Way Ste 405, Miami, FL 33145
MGR	Patrick Powers
· · · · · · · · · · · · · · · · · · ·	2050 Coral Way Ste 405, Miami, FL 33145
MGR	Jaime Uribe
	2050 Coral Way Ste 405, Miami, FL 33145
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
This document is executed in accordance	r an authorized representative of a member ce with section 605.0203 (1) (b). Florida Statutes, I am aware the tument to the Department of State constitutes a third degree felo
Patrick Powers, as manager	
T	yped 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)