L23000518170

(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:

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COVER LETTER

TO: New Filing So Division of C			
SUBJECT: FAIRSQ	,		
SUBJECT: (*********		ulting Florida Limited	ed Company)
			on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g this matter to:	
Anthony Morales			
	(Contact Person)		
MyUSACorporation.com	n		
	(Firm/Company)		
1 Radisson Plaza, Suite	e 800		
	(Address)		
New Rochelle, NY 108			
	City, State and Zip Code)		
info@myusacorporation			
	e used for future annual re	nost notifications)	
For further information	on concerning this ma	ter, please call:	
Arithony Morales		at (877)	330-2677
(Name of Conta	et Person)		(Daytime Telephone Number)
	or the following amou a bank located in the		rocessed 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 F and Certified Copy	
Mailing Add	ress:	S	Street Address:
New Filing Se			New Filing Section
Division of C	-		Division of Corporations
P.O. Box 632	7	7	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Conversion

For

"Other Business Entity"

Ínto

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.

Statutes.	
1. The name of the "Other Business Entity" immediately prior to the filing of the Article FAIR SQUARE COMICS LLC	s of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a (Emer entity type. Example: corporation, limited partnership, general partnership, common	
(Enter entity type. Example: corporation, limited partnership, general partnership, common	i law or business trust, etc.,
First organized, formed or incorporated under the laws of	name of the country)
06/20/2019	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Artic	cles of Organization:
FAIRSQUARE COMICS 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 96 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 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 appraisa which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	al rights the amount to 2028 NOV 15 PATH: 2

Signed this 9th day of November	20_23
Signature of Authorized Representative of Lim	ited Liability Company:
	Sall
Signature of Authorized Representative:	
Printed Name: Fabrice Sapolsky	Title: Member
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature:	-un-
Signature: Printed Name: Fabrice Sapolsky	Title: Member
Signature: Printed Name:	Children Co.
Timed Name.	1 IIIe:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
Signature:	
Printed Name:	Title:
If Florida Corporation:	42.05
Signature of Chairman, Vice Chairman, Director, or If Directors on Officers have not been subjected as I	Officer.
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnershin:
Signature of one General Partner.	<u> </u>
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Control of the contro	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

FAIRSQUARE COMICS LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
418 Canal St	418 Canal St
New Smyrna Beach, FL 32168	New Smyrna Beach. FL 32168
2000,1200	Tron onlying beach. TE 32100

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Seward's Accounting & Tax	LLC
Nai	ne
418 Canal St	
Florida street address (P.	O. Box <u>NOT</u> acceptable)
New Smyrna Beach	FL 32168
City	Zip

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. Thereby 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..

Kirstyn Seward

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

Fabrice Sapolsky

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

<u>Inte:</u> 'AMBR" = Authorized Member	Name and Address:
'MGR" = Manager AMBR	Fabrice Sapolsky
WOOT TO THE PROPERTY OF THE PR	144-87 41st Avenue #510
	Flushing, NY 11355
	1 tustility, 141 11333
AMBR	Kristal Adams Sapolsky
· · · 	144-87 41st Avenue #510
	Flushing, NY 11355
AMBR	Ethan Sapolsky
	144-87 41st Avenue #510
	Flushing, NY 11355
Use attachment if necessary)	
LE V: Other provisions, if any,	
2r. V. Other provisions, if any,	
DEZMINDEN GIZANIA TRUBAN	
REQUIRED SIGNATURE:	
	Salle
Signature of a member or	an authorized representative of a member

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)