## 12400062411

(Re	questor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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## COVER LETTER

10: New Filing Se Division of C				
SUBJECT: KRUKTE	снис			
	<del></del>	witting Florida Lin	ited Con	opany)
The enclosed Article Business Entity" inte	s of Conversion, Artic a "Horida Limited L	les of Organiza lability Compan	tion, an ıy" in a	d fees are submitted to convert an "Other coordance with s. 605,1045, F.S.
Please return all com	espondence concernin	g this matter to	:	
Egor Kruk				
KRUKTECH LLC	(Contact Person)			
	(Firm/Company)		_	
10122 Ringling Street				
	(Address)			
NEW PORT RICHEY,	FL 34655			
(0	City, State and Zip Code)		_	
krukegor.a@gmail.com	n			
E-mail Address: (to b	e used for future annual re	port notifications)	_	
For further informati	on concerning this ma	itter, please call	:	
Egor Kruk		_at ( <sup>646</sup>	) <sup>575</sup> -	4188
(Name of Conta	ect Person)	(Area Cod	e) (Day	time Telephone Number)
	or the following amou a bank located in the		proces	sed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	S180,00 Filin and Certified Co		■\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

18/15/11 (7/17)

## Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

ERUKTECH 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)
06/29/2021 00
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  KRUKTECH LLC  (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
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	22 day of DECEMBER	<u>20</u>
Signature o	f Authorized Representative of Lin	ited Lability Company:
Simonum at	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	///
Deintad Nam	Authorized Representative:	The state of the s
Finned Nam	E EGON ANON	Title: MANAGING MEMBER
Signature(s'	on behalf of Beher Business Entity:	[See below for required signature(s)]
	1/1/4///	fore orion to tedance wenners (3)
Signature:	My	
Printed Nant	E.EGOR KRUK	Title: MANAGING MEMBER
Signature:		
Printed Nam	e:	Title:
Signature: _		
Printed Nam	c:	Title:
Signature:		
Printed Nam	e:	Title:
Signature: _		
Printed Nam	c:	Title:
Signature		
Printed Nam	c:	Title:
		THIE.
1f Florida C	orporation:	
Signature of	Chairman, Vice Chairman, Director, or	Officer.
If Directors of	or Officers have not been selected, an In	corporator must sign.
If Florida G	eneral Partnership or Limited Liabil	by Bostoschio.
Signature of	one General Partner.	tv rartnersmp:
If Florida Li	imited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of	ALL General Partners.	
All others:		
	an authorized person.	
U		
Fees:		
استأمر ۾	les of Conversion:	60.00
	ies of Conversion: for Florida Articles of Organization:	\$25.00
	fied Copy:	
	ficate of Status:	\$30.00 (Optional)
Cenn	ireare or states;	\$5.00 (Optional)



## ARTICLES OF ORGANIZATION FOR ELORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limi	: ted Linbility Company	is:
KRUKTECH LLC		
(Must c	ontain the words "Limited Lie	hility Company, "I. I. C.," or "I.I.C.")
ARTICLE II - Addr	-051	
The mailing address a	and street address of th	e principal office of the Limited Liability Company i
Principal Office Add	lress:	Mailing Address:
10122 RINGLING STRE	EET	10122 RINGLING STREET
TO LES MINOCINO STA		10 122 1111 GEN 10 G 1 1 1 2 2 1
NEW PORT RICHEY F	L 34655 stered Agent, Registe	NEW PORT RECHEY FL 34655  red Office, & Registered Agent's Signature:
ARTICLE III - Regi (The Limited Liability Composition of the Limited Liability Composition of the Liability with an activ	stered Agent, Registe any cannot serve as its own Re Florida registration ) rida street address of the	NEW PORT RECHEY FL 34655  red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
ARTICLE III - Regi (The Limited Liability Composition of the Limited Liability Composition of the Liability with an activ	L 34655  stered Agent, Registe any cannot serve as its own R re Florida registration ) rida street address of the	NEW PORT RECHEY FL 34655  red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another  re registered agent are:
ARTICLE III - Regi (The Limited Liability Composition of the Limited Liability Composition of the Liability with an activ	L 34655  stered Agent, Registe any cannot serve as its own R re Florida registration ) rida street address of the	NEW PORT RECHEY FL 34655  red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
ARTICLE III - Regi The Limited Liability Comp- business entity with an activ The name and the Flor	L 34655  stered Agent, Registe any cannot serve as its own R re Florida registration ) rida street address of the	NEW PORT RECHEY FL 34655  red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another  the registered agent are:
ARTICLE III - Regi (The Limited Liability Comp- business entity with an activ The name and the Flor	L 34655  stered Agent, Registe any cannot serve as its own R re Florida registration ) rida street address of th  GOR KRUK  No.	NEW PORT RECHEY FL 34655  red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another  the registered agent are:
ARTICLE III - Regi (The Limited Liability Comp business entity with an activ  The name and the Flor  EC	L 34655  stered Agent, Registe any cannot serve as its own R re Florida registration ) rida street address of th  GOR KRUK  No.	NEW PORT RECHEY FL 34655  red Office, & Registered Agent's Signature: registered Agent. You must designate an individual or another the registered agent are:  me  O. Box NOT acceptable)
ARTICLE III - Regi (The Limited Liability Comp business entity with an activ  The name and the Flor  EC	stered Agent, Register any cannot serve as its own Registration ) rida street address of the GOR KRUK  Note: 122 RINGLING STREET for idea street address (F	NEW PORT RECHEY FL 34655  red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another  re registered agent are:

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 positive as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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Title:	Name and Address:
AMBR" = Authorized Member MGR" = Manager	
MBR	EGOR KRUK
	10122 RINGLING STREET
	NEW PORT RICHEY FL 34655
<del></del> .	
<u> </u>	
<del> </del>	
(Use attachment if necessary)	
LE V: Other provisions, if any.	
REQUIRED SICHATURE:	
- Walter -	

ARTICLE IV-

EGOR KRUK

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)

2024 JAN -5 AM 9: 40

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