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COVER LETTER

TO: New Filing S Division of O					
SUBJECT: Source	eway Group LLC				
	(Name of Res	ulting	Florida Lim	ited Com	npany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all cor	respondence concernin	g this	matter to:		
Maria Fernandez					
	(Contact Person)			_	
Sourceway Group	LLC				
	(Firm/Company)			-	
1317 EDGEWATER DR	# 6729		_		
•	(Address)				
ORLANDO FL 32804					
	(City, State and Zip Code)			_	
sourcewaygroup@	gmail.com				
E-mail Address: (to	be used for future annual re	port no	tifications)	_	
For further informat	ion concerning this ma	tter, p	lease call:		
Maria Fernandez		at (347	9231	944
(Name of Cont	act Person)			:) (Day	time Telephone Number)
	for the following amount a bank located in the			process	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		80.00 Filing Certified Co	-	☐S185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add					Address:
New Filing S Division of O					Filing Section ion of Corporations
P.O. Box 633	•				Centre of Tallahassee
Tallahassee,	FL 32314			24151	N. Monroe Street, Suite 810

Tallahassee, FL 32303

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Sourceway Group LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(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)
11/9/2020 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:
Sourceway Group LLC
(Enter Name of Florida Limited Liability Company) 12/28/2023
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	day of December	_ 20 <u>23</u>		
Signature	of Authorized Representative of Limit	ted Liability Company:		
Signature of Printed Nar	of Authorized Representative: Manime: Maria Fernandez	a. Jernandez Title: CEO	_	
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)		
Signature: Printed Nar	Maria Fernandez nc:Maria Fernandez	Title: CEO	_ _	
	ne:			
	ne:		- - :::	
Signature: Printed Nar	me:	Title:	SECTED ALLAND	المخت
Signature: Printed Nar	me:	_ Title:	He 7- h	
Signature: Printed Nar	me:	Title:	STATE CONTE	
Signature o	Corporation: Chairman, Vice Chairman, Director, or Corporation of			
	General Partnership or Limited Liabilit of one General Partner.	y Partnership:		
	Limited Partnership or Limited Liabilit of <u>ALL</u> General Partners.	y Limited Partnership:		
All others: Signature o	f an authorized person.			
Fees:				
Fee Cer	icles of Conversion: es for Florida Articles of Organization: tified Copy: tificate of Status:	\$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 Liability Company is:	
Sourceway Group LLC (Must contain the words "Limited Liabilit	v Company "L. C." or "L. C.")
(Must contain the words - Limited Clabin)	y Company, E.E.C., of EEC.)
ARTICLE II - Address:	
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1317 Edgewater Dr #6729	1317 Edgewater Dr #6729
ORLANDO FL 32804	ORLANDO FL 32804
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
The name and the Florida street address of the r	egistered agent are:
Maria Fernandez	7.00 F
Namo	SE SE SE
1317 Edgewater Dr #6729	
Florida street address (P.O	Box NOT acceptable)
Orlando	32804 STATE OF THE
City	Zip
Having been named as registered agent and to	o accept service of process for the above stated limite

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
AMBR	Maria Fernandez	
	1317 Edgewater Dr #6729	
	ORLANDO FL 32804	
AMBR	Jandl Scott	
	1317 Edgewater Dr #6729	
	ORLANDO FL 32804	
		7,2
AMBR	Isabella Brown	LL SEL
	1317 Edgewater Dr #6729	<u> </u>
	ORLANDO FL 32804	<i>€</i> 55 3
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(Use attachment if necessary)		
,		
CLE V: Other provisions, if any.		
	· ·	
REQUIRED SIGNATURE:		
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Naria Ternan	idea.	
	1	

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Maria Fernandez

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)