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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: BEST VISION MARKETING L	LC	
(Name of F	Resulting Florida Limi	ited Company)
The enclosed Articles of Conversion, Art Business Entity" into a "Florida Limited		ion, and fees are submitted to convert an "Other y" in accordance with s. 605.1045, F.S.
Please return all correspondence concern	ing this matter to:	
SETH E. SALVER		
(Contact Person)		_
SALVER + SALVER CPAs LLP		
(Firm/Company)		-
12550 BISCAYNE BLVD STE 700		
(Address)		-
NORTH MIAMI FL 33181		
(City, State and Zip Code	:)	_
SETH@SALVER.COM		
E-mail Address: (to be used for future annual	report notifications)	_
For further information concerning this r	natter, please call:	
SETH E. SALVER	at (_305	864-7888
(Name of Contact Person)	(Area Code	(Daytime Telephone Number)
Enclosed is a check for the following and dollars and drawn on a bank located in the		processed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	s \$\Bigsigs \\$180.00 Filing and Certified Cop	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 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: BEST VISION MARKETING 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)
MAY 15TH, 2019 on (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
BEST VISION MARKETING 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 28	day of _DECEMBER	20
	norized Representative of Limi	
	orized Representative: 🛌 🔑	- Co
Signature of Author	orized Representative: y	TILL MANACING MEMORE
Printed Name: ALA	N APPELBAUM	Title: MANAGING MEMBER
Signaturo(s) on ho	half of Other Rusiness Entity	[See below for required signature(s)]
		• • • • • • • • • • • • • • • • • • • •
Signature: -	Chan Com	Title: MANAGING MEMBER
Printed Name: ALA	N APPELBAUM	Title: MANAGING MEMBER
Signature:		
Printed Name:		Title:
Signature:		Title:
Printed Name:		Title:
Signature:		
Printed Name:	•	l itle:
C:		
Signature:		_ Title:
rimicu ivame		_ 1 mc.
Signature:		
Printed Name:		Title:
If Florida Corpora	ation:	
	nan, Vice Chairman, Director, or	Officer.
If Directors or Office	cers have not been selected, an In	corporator must sign.
	<u>l Partnership or Limited Liabili</u>	ty Partnership:
Signature of one G	eneral Partner.	
	Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL	General Partners.	
All others:		
Signature of an aut	horized person	
Signature of an aut	norized person.	
Fees:		
Articles of	Conversion:	\$25.00
	orida Articles of Organization:	\$125.00
Certified C	_	\$30.00 (Optional)
Certificate	• •	\$5.00 (Optional)
Commeate	or status.	Solve (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
BEST VISION MARKETING LLC		
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
1500 W CYPRESS CREEK RD #508	1500 W CYPRESS CREEK RD #508	
FT LAUDERDALE 33309	FT LAUDERDALE 33309	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the reALAN APPELBAUM	red Agent. You must designate an individual or another	
Name		
1500 W CVDDESS CDEEK DD) #E00	
1500 W CYPRESS CREEK RD #508 Florida street address (P.O. Box NOT acceptable)		
·	 · ·	
FT LAUDERDALE	FL 33309	
City	Zip	
liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S	
	· · · · · · · · · · · · · · · · · · ·	

(CONTINUED)

ARTICLE IV-

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

"AMBR" = Authorized Member	
"MGR" = Manager	AL ANI ADDEL DALIM
AMBR	ALAN APPELBAUM
	1500 W CYPRESS CREEK RD #508
	FT LAUDERDALE FL 33309
(Use attachment if necessary)	
(Use attachment if necessary) LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordant.	or an authorized representative of a member ce with section 605.0203 (1) (b), Florida Statutes. I am aware the
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordant.	ce with section 605.0203 (1) (b), Florida Statutes. I am aware tl
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordan any false information submitted in a document in a documen	or an authorized representative of a member ce with section 605.0203 (1) (b), Florida Statutes. I am aware the cument to the Department of State constitutes a third degree felo
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordant any false information submitted in a document as provided for in s.817.155, F.S. ALAN APPELBAUM	ce with section 605.0203 (1) (b), Florida Statutes. I am aware tl