

L24000093598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

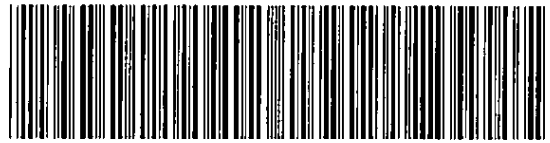
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100422634741

01/25/24--01016--011    ••195.00

RECEIVED  
JAN 26 AM 11:34  
100422634741

M



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

FILED  
2024 JAN 26 AM 11:35  
STATE OF FLORIDA  
TALLAHASSEE

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:  
GALP FAIR LLC

(Enter Name of Other Business Entity)  
LLC

2. The "Other Business Entity" is a \_\_\_\_\_  
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)  
California

First organized, formed or incorporated under the laws of \_\_\_\_\_  
(Enter state, or if a non-U.S. entity, the name of the country)

May 8, 2019

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**:  
GALP FAIR LLC

(Enter Name of Florida Limited Liability Company)  
January 25, 2024

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 24 day of January, 2020.

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative: *Paulina Lifanova*  
Printed Name: Paulina Lifanova Title: Founder and CEO

**Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]**

Signature: *Paulina Lifanova*  
Printed Name: Paulina Lifanova Title: Founder and CEO

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

FILED  
2024 JAN 26 AM 11:35  
STATE OF FLORIDA

**If Florida Corporation:**

Signature of Chairman, Vice Chairman, Director, or Officer.  
If Directors or Officers have not been selected, an Incorporator must sign.

**If Florida General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**All others:**

Signature of an authorized person.

**Fees:**

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

## ARTICLE I - Name:

The name of the Limited Liability Company is:

GALP FAIR 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:

407 Lincoln Rd, 6H, Miami Beach, FL 33139

### Mailing Address:

407 Lincoln Rd, 6H, Miami Beach, FL 33139

## 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:

Paulina Lifanova

Name

407 Lincoln Rd, Suite 6H

Florida street address (P.O. Box **NOT** acceptable)

Miami Beach

33139

FL

City

Zip

2021 JAN 26 AM 11:35  
FILED

*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..*

*J. Lubo*

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:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

**Name and Address:**

Paulina Lifanova

407 Lincoln Rd, 6H, Miami Beach, FL 33139

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

\_\_\_\_\_  
\_\_\_\_\_

FILED  
2024 JUN 26 AM 11:35  
DEPT. OF STATE  
TALLAHASSEE, FLORIDA

**REQUIRED SIGNATURE:**

*Paulina Lifanova*

\_\_\_\_\_  
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.

Paulina Lifanova  
\_\_\_\_\_

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)