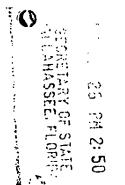
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| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certificates of Status |
| Special Instructions to Filing Officer |
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Office Use Only



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CAPITAL CONNECTION, INC.417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

| TONGA'S DESIG | GNS, INC. | ······ | | | |
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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 Section 605.1045, Florida Statutes.

- 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: **TONGA'S DESIGNS, INC.**
- 2. The "Other Business Entity" is a Corporation, first organized, formed or incorporated under the laws of Florida, filed on April 15, 1998.
- 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: TONGA'S LADIES BOUTIQUE, LLC.
- 4. This conversion was approved by the eligible converting entity in accordance with all applicable statutes.
- 5. Effective on date of filing.

| 6. | The "Converted or Other Business Entity" has agreed to pay any members having appraisal |
|----|---|
| | rights the amounts to which such members are entitled under Sections 605.1006 and |
| | 605.1061-605.1072, Florida Statutes. |

Signed this // day of March , 2024.

Required Signature of Authorized Representative of Limited Liability Company

Signature of Authorized Representative:

Carolyn Habelman, its Authorized Member

Required Signature on behalf of Other Business Entity:

Carolyn Habelman, its President

ARTICLES OF ORGANIZATION FOR RESULTING FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I Name

The name of the Limited Liability Company is TONGA'S LADIES BOUTIQUE, LLC

ARTICLE II Address

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

Principal Address: 127 S. Barfield Drive, Marco Island, Florida 34145

Mailing Address: 960 Cape Marco Drive #905, Marco Island, Florida 34145

ARTICLE III

Registered Agent, Registered Agent Office and Registered Agent's Signature

The Name and Florida Address of the Registered Agent are:

Registered Agent:

Carolyn Habelman

Registered Agent Address:

127 S. Barfield Drive

Marco Island, Florida 34145

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 diffies, and I am familiar with and accept the obligations of my position as Registered Agent as provided in Chapter 605, Florida Statutes.

Registered Agent Signature

Dated: 11 March, 2024

ARTICLE IV Purpose

The purpose for which the corporation is organized is ANY AND ALL LAWFUL BUSINESS.

ARTICLE V Members/ Manager

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

Title

Name and Address

Authorized Member

CAROLYN HABELMAN
960 Cape Marco Drive #905
Marco Island, FL 34145

REQUIRED SIGNATURE:

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 Section 817.155, Florida Statutes.

CAROLYN HABELMAN

Typed or Printed Name of Signee