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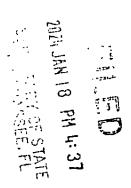
(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 21, 2024

ANTHONY THORNTON 337 SLEEPY HOLLOW DR INTERLACHEN, FL 32148 US

SUBJECT: A&A POWERSPORTS LLC

Ref. Number: W24000029406

We have received your document for A&A POWERSPORTS LLC and check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 824A00003845

Tekayla T Matthews Regulatory Specialist II

www.sunbiz.org

COVER LETTER

Division of Corporations SUBJECT: A A POWEYSOOP S LLC (Name of Resulting Florida Limited Company) The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S. Please return all correspondence concerning this matter to: ATHOM TOWN TO Contact Person) A & A POWEYSOOPS (Firm/Company) 337 SIEPPN HOLOW DY. (Address) Interlaction of Corporations (Name of Resulting Florida Limited Company) The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Limited Company" in accordance with s. 605.1045, F.S. Please return all correspondence concerning this matter to: A POWEYSOOPS (Firm/Company) (Address)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S. Please return all correspondence concerning this matter to: Anthony (Contact Person) A E A POWPY SOOYTS (Firm/Company) 337 SIEED HOLDW DY (Address) Interluction FL 32148
Anthony Thornton A E A Powersports (Firm/Company) 337 Sleepy Hollow Dr. (Address) Interlachen, FL 32148
AEA POWERSports (Firm/Company) 337 SHEEPY HOLLOW Dr. (Address) Interlachen, FL 32148
1nterlachen, FL 32148
1nterlachen, FL 32148
Interlachen, FL 32148
(City, State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
(Name of Contact Person) at (380) 983 DUS (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
\$150.00 Filing Fees (\$25 for Conversion & S125 for Articles of Organization) \$155.00 Filing Fees and Certified Copy \$180.00 Filing Fees and Certified Copy Certified Copy, and Certificate of Status
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

FILED

Articles of Conversion 2024 JAN 18 PM 4: 37

"Other Business Entity" SECONDARY OF STATE

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

1. The name of the "Other Rusiness Enginess Enginess
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
(Enter Name of Other Business Entiry)
2. The "Other Business Entity" is a CDYDDYQ+100 (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.) First organized, formed or incompress to the second secon
of incorporated under the laws of
on Dalal 2019 (Enter state, or if a non-U.S. entity, the name of the country) (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: DI DI 2024. (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 a second se

- 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 21 day of December	per 20 23
Signature of Authorized Representative of	Limited to a new
Printed Name: Anthony Thombon	Title: AAC. O. P
of Other Business Ent	tur IC
Signature: Printed Name: HOHOON Thomto	(see selow for required signature(s)]
Printed Name: HOTHON Thomto	O Title: Many
Signature: Printed Name: Signature:	Letric
Frinted Name:	Title:
Signature: Printed Name: Signature:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title
Signature.	
Signature: Printed Name:	Title:
Signature	
Printed Name:	Title
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, an I	
If Florida General Partnership or Limited Liabi Signature of one General Partner.	lity Partnership:
If Florida Limited Partnership or Limited Liabil Signatures of ALL General Partners.	ity Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABIL ARTICLE I - Name: The name of the Limited Liability Company is: ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: Sleepy Hollow Dr 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 The name and the Florida street address of the registered agent are: 337 Sleepy Hollow Dr. Florida street address (P.O. Box NOT acceptable) 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. Agent's Signature (REQUIRED)

(CONTINUED)

The name and address of each person	authorized to manage and control the Limited Liab
Company:	manage and control the Limited Liab
<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Anthony Thornton 387 Steepy Hollow Dr. Interlaction Fl 32148
	B916
(Lise attachman is	
(Use attachment if necessary)	
PTICLE V. C.	
RTICLE V: Other provisions, if any.	
REQUIPED SIGN.	
REQUIRED SIGNATURE:	_
Signat	
This document is executed in accordance with	thorized representative of a member
any false information submitted in a document to a as provided for in s.817.155, F.S.	thorized representative of a member ction 605.0203 (1) (b), Florida Statutes, I am aware that the Department of State constitutes a third degree felony
- Anthony Thornto	
	printed name of signee
\$125.00 Filing Foo 6	Filing Fees
\$ 30.00 Certified Copy (Optional)	Filing Fees nization and Designation of Registered Agent \$ 5.00 Certificate of Status (Optional)

ARTICLE IV-