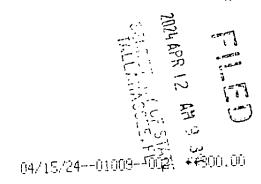
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Bocament Namber)
Certified Copies Certificates of Status
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SECRETARY OF STATE



Advanced Incorporating Service

1317 California Street P.O. Box 20396 Tallahassee, FL 32316 Phone: 850-222-CORP Fax: 850-575-2724 Email: wlopez@aisincfl.com Website: www.aisincfl.com

	Tallahassee, FL 32316	Email: wlopez@aisincfl.com Website: <u>www.aisincfl.com</u>	
NAME OF ENTITY			
Steeling Ventures LLC	_		
	_		
	_		
	<u> </u>	FOR OFFICE USE ONLY	
PICK ONE:			
CERTIFIED COPY XX	_PHOTOCOPY _	C.U.S.	
FILING:			
CORPORATIONLLCLIMITED	PARTNERSHIP	_GENERAL PARTNERSHIP	
FICTTTIOUS NAMESERVICEM	IARK/TRADEMARK	AMENDMENT	
FOREIGN QUALIFICATIO	ONJUDGMENT	r lien	
XX OTHER Conversion	1		
RETRIEVAL:		5: 5:	
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Of		PR PR	ement Lorent
Or			[<u>-</u> -
APOSTILLE/NOTARY CERTIFICATION I	REQUEST:		
Country		구된 때	
Amount of Docume	ents	—- L:	
DATE_ 4/12/24	TIME		
Notes:			

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.

	(Enter Name of Other Business Entity)
2. The "Other Busin	ess Entity" is a
(Enter enti	ty type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized form	ed or incorporated under the laws of
·	(Enter state, or if a non-U.S. entity, the name of the country)
12/19/2018 on	
	tormation or incorporation)
STEELING VENTURE	lorida Limited Liability Company as set forth in the attached Articles of Organization: S LLC
	32 At 34 CAN 13 At 1 At 12 At 12 At 13 At 14 At
	(Enter Name of Florida Limited Liability Company)
4. If not effective on	(Enter Name of Florida Limited Liability Company) the date of filing, enter the effective date:
(The effective date: the date this docum Note: If the date inserted	
(The effective date: the date this docum Note: If the date inserted document's effective date	the date of filing, enter the effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after ent is filed by the Florida Department of State.) in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

Signed this 12th day of April	_ 20 24	
Signature of Authorized Representative of Limi	ted Liability Company:	
Signature of Authorized Representative: Soan Teeling	Tooling Title Manager	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]	
Signature: Sean Teeling Printed Name: Sean Teeling	Title: Manager	
Signature:Printed Name:	_ Title:	
Signature:Printed Name:	Tr'.1	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc. If Florida General Partnership or Limited Liabilit Signature of one General Partner.	corporator must sign.	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	3.1033 TALL
All others: Signature of an authorized person.		NINSS 0
Fees:		11 -1 -1 CV 1 1 -1
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	<u> </u>

2024 APR 12 AH S

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	e Limited Liability Compar	ıy is:	
STEELING VEN	TURES LLC		
	(Must contain the words "Limited I	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II -	- Address:		
		he principal office of the Limited Liabil	ity Company is:
Principal Offic	ce Add <u>ress:</u>	Mailing Address:	
999 SW 1st Ave	UPH05	Same	
Miami, FL 33130			
 -	<u>-</u>		
The Limited Liabili business entity with		•	
		Name	
		160	
	1317 California Street	160	
	1317 California Street	Vame	ي
	1317 California Street Florida street address	(P.O. Box <u>NOT</u> acceptable)	77.1. LPR

(CONTINUED)

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Sean Teeling
- INCH	999 SW 1st Ave UPH05
	Miami, FL 33130
	Wildriff, 7 E 33 130
	
•	
(Use attachment if necessary) LE V: Other provisions, if any,	
REQUIRED SIGNATURE:	
Sean Teeling	<u>e</u>
- The state of	<u> </u>
	r an authorized representative of a member 🥂 🕟
This document is executed in accordance	re with section 605.0203 (1) (b). Florida Statutes, I am aware the the Department of State constitutes a third degree felo
This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Sean Teeling	ument to the Department of State constitutes a third degree felo
This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Sean Teeling	with section 605.0203 (1) (b). Florida Statutes. I am aware the timent to the Department of State constitutes a third degree felocyped or printed name of signee Filing Fees

\$ 5.00 Certificate of Status (Optional)

\$ 30.00 Certified Copy (Optional)