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(Req	uestor's Name)	
(Addı	ess)	
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(City/	State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
	ness Entity Nar	ne)
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(Doce	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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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 Article Fight Science Made Simple LLC	es of Conversion is:
(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	
(Enter entity type. Example: corporation, limited partnership, general partnership, common	n 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)
08/27/2021	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Artic	cles of Organization:
Fight Science Made Simple 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	0 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 document's effective date on the Department of State's records.	will not be listed as the
	202
5. The plan of conversion has been approved in accordance with all applicable statutes.	2024 Air
 The "Converted or Other Business Entity" has agreed to pay any members having apprais which such members are entitled under ss. 605.1006 and 605.1061-605.1072. F.S. 	al rights the amount to
	ဂ်ာ
	S

\$30.00 (Optional) \$5.00 (Optional)

Certified Copy:

Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Na The name of the L	me: imited Liability Company is:			
Fight Science Made S	Simple LLC ust contain the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")		
ARTICLE II - Ac The mailing addre	ddress: ss and street address of the pr	rincipal office of the Limited	l Liabili	y Company is:
Principal Office	Address:	Mailing Address:		
Five Greentree Centre	e, 525 Route 73 North STE 1	7901 4th St N STE 300		
Marlton NJ 08053		St. Petersburg FL 33702		
ARTICLE III - Registered Agent, Registered Office, & Registered Ag. (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Northwest Registered Agent LLC Name			ndividual c	r another
	7901 4th St N STE 300		-	Ċ
	Florida street address (P.O. Box NOT acceptable)		3.	č υ.
	St. Petersburg	FL FL	·	₹. 23
	City	Zip		
liability com registered agent statutes relativ	med as registered agent and to pany at the place designated in and agree to act in this capac ag to the proper and complete bligations of my position as re	n this certificate. I hereby acc city. I further agree to compl performance of my duties, an	ept the c y with th id I am fe	ippointment as e provisions of all imiliar with and

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

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

er Man	Title:	Name and Address:	
	"AMBR" = Authorized Member "MGR" = Manager		
	AMBR	Benedetto, Frank	
		7901 4th St N STE 300	
		St. Petersburg, FL 33702	
AM	AMBR	Snyder, Adam	
		7901 4th St N STE 300	
		St. Petersburg, FL 33702	
(Use attachment if necessary)	(Use attachment if necessary)		2024 Airs
		₽.	
ARTICLE V: Other provisions, if any.			Ġ
			5.
	<u>REQUIRED</u> SIGNATURE:		
	Nat Smi	th	
	1,000		

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.

Nat Smith

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)