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(Requestor's Name)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Dusiness Entitle Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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24 JUN I 4 PM 4: 48
SECRETARY OF STATE
ALLAHASSEF, ELOPIO



COVER LETTER

Division of Co						
SUBJECT: Luxe Sta	r Executive Stays LLC					
Subject.	(Name of Res	ulting Florida Lin	nited Con	npany)	,	
The enclosed Articles Business Entity" into	s of Conversion, Articl a "Florida Limited Li	es of Organiza ability Compa	ition, an ny" in a	d fees are submitted to cocordance with s. 605.10	convert an "Other 045, F.S.	
Please return all corre	espondence concerning	this matter to	:			
Joel Finnie						
	(Contact Person)					
	(Firm/Company)					
4858 Borealis Ct					ZI SI TAI	
	(Address)				CR S	_
Melbourne, FL 32940			_		芸芸	- ר נ
((City, State and Zip Code)		_		SSE SSE	Ī
joelfinnie@gmail.com						1
E-mail Address: (to b	e used for future annual re	port notifications)		FI SI	ţ
For further information	on concerning this ma	tter, please cal	l:		24 JUN 14 PH 4: 48 SECRETARY OF STATE ALLAHASSEE, FLORIO	
Joel Finnie		_at (813-	8218		
(Name of Conta	ect Person)	(Area Coo	le) (Day	ytime Telephone Number)	-	
	or the following amou		s proces	sed by this office must b	e payable in US	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	S180.00 Fili and Certified C	_	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
Mailing Add New Filing S Division of C P.O. Box 632	ection Corporations		New Divis	et Address: Filing Section Sion of Corporations Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Conversion For "Other Business Entity"

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 Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Luxe Star Executive Stays LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of (Extension or if a non-U.S. entity the name of the conflict)
(Enter state, or if a non-U.S. entity, the name of the country)
08/13/2019 Single F
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Granization:
Luxe Star Executive Stays 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 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.

- 5. The plan of conversion has been approved in accordance with all applicable s
- 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.

Signature of Authorized Representative: Joel Finnie

Printed Name: Joel Finnie ** Imperium Management Group LLC Title: Manager

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

Signature: Printed Name: Joel Finnie ** Imperium Management Group LLC Title: Manager

Signature: Title: Signature: Title: Signature: Title: Signature: Title: Signature: Title: Signature: Title: Title

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.

Printed Name:

Signature:

Printed Name:

Printed Name:

Signature: _______Printed Name: ______

DigiSign Verified - dcad7647-34fd-40c1-b33e-1eb1b256de5b

Signed this 31 day of May

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)

Title: ______

Certificate of Status:

\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Nat	me:			
The name of the L	imited Liability Comp	any is:		
Luxe Star Executive	Stays LLC			
(M)	ist contain the words "Limited	d Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Ac	ldress:			
The mailing address	ss and street address of	f the principal office of the Limited I	Liability Company is	:
Principal Office A	Address:	Mailing Address:		
4858 Borealis Ct		4858 Borealis Ct	- 4 .	
Melbourne, FL 3294	10	Melbourne, FL 32940	- 	_
			- 58	1
(The Limited Liability C business entity with an	ompany cannot serve as its ov active Florida registration.)	istered Office, & Registered Agent wn Registered Agent. You must designate an indition of the registered agent are:	Seminaries Sixues Sixues Sixues Sixues Florida Florida	
	000.7	Name		
	4858 Borealis Ct			
	Florida street addres	ss (P.O. Box <u>NOT</u> acceptable)		
	Melbourne	FL ³²⁹⁴⁰		
	City	Zip		

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	Imperium Management Group LLC
MGR	4858 Borealis Ct
	Melbourne FL, 32940
	<u> </u>
	ARE AH
	D
	SST F
	mo mo
(Use attachment if necessary)	PM 4: 48 OF STATE FLORIDA
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
1/1 Stim	P
(Signature of a member or	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that
any false information submitted in a docu as provided for in s.817.155, F.S.	ment to the Department of State constitutes a third degree felor
Joel Finnie Signing as Imperium Manage	
Ty	ped or printed name of signee
	Filino 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)