# L24000321423

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

Office Use Only



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# **COVER LETTER**

TO:	New Filing Se Division of Co				
CHD	JECT: Dub Club	LLC			
SUD	JEC1:	(Name of Res	ulting Florida Lin	nited Con	npany)
The e	enclosed Articles ness Entity" into	s of Conversion, Articl a "Florida Limited Li	les of Organiza ability Compa	ition, an ny'' in ac	d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Pleas	e return all corre	espondence concerning	g this matter to	:	
Aaror	n Parthemer				
		(Contact Person)			
PMG	Private CFO Sen	vices		_	
		(Firm/Company)			
1800	E Las Olas Blvd I	FL 2			
		(Address)			
Fort L	auderdale, FL 33	301			
	((	City, State and Zip Code)			
aaror	@pmgcfo.com				
E-	mail Address: (to b	e used for future annual re	port notifications)		
For f	urther informati	on concerning this ma	tter, please call	l:	
Aaror	n Parthemer		_at ( <u>954</u>	) <u>395-</u> -	1225
	(Name of Conta	ct Person)	(Area Coo	le) (Day	rtime Telephone Number)
Enclo dolla	osed is a check f rs and drawn on	or the following amou a bank located in the	int: (All checks United States)	process	sed by this office must be payable in US
(\$25 f & \$12	50.00 Filing Fees for Conversion 25 for Articles ganization)	□\$155.00 Filing Fees and Certificate of Status	☐\$180.00 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 Tallahassee.	ection orporations 7		New Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303

#### **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 Articles of Conversion is:  Dub Club LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liabilty Company  (Enter entity type. Example: corporation, limited partnership, general partnership, common 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)
12/14/2022  (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  Dub Club 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.

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.

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:				
The name of the Limited Liability Company is:				
Dub Club LLC				
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
2511 N Grady Ave	1800 E Las Olas Blvd, FL 2			
Unit 91	Fort Lauderdale, FL 33301			
Tampa, FL 33607				
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)  The name and the Florida street address of the re	red Agent. You must designate an individual or another			
Canela Services LLC				
Name				
1800 E Las Olas Blvd FL 2				
Florida street address (P.O.	Box NOT acceptable)			
Fort Lauderdale	FL_33301			
City	Zip			
liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate. I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S			

(CONTINUED)

<u> </u>	Name and Address:
'MGR" = Manager AMBR	Christian Watson
	Christian Watson 2511 N Gody Ave Unit 91 Tampa, FL 33607
· · · · · · · · · · · · · · · · · · ·	
Use attachment if necessary)	
LE V: Other provisions, if any.	
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 the injent to the Department of State constitutes a third degree felo
any false information submitted in a docu as provided for in s.817.155, F.S.	The second secon
any false information submitted in a docu	De Circitian Watson, reped or printed name of signee Managua, of

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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

. : . :

ARTICLE IV-

	7.1
Signed this 10th day of July	20
Signature of Authorized Representative of Limi	ted Liability Company:
	1
Signature of Authorized Representative:	Till Managing Mambar
Printed Name: Christian Watson	Title: Managing Member
Signature(s) on behalf of Other Business Entity: [	
Signature: Printed Name: Christian Watson	
Printed Name: Christian Watson	Title: Managing Member
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature: Printed Name:	Title.
Printed Name:	Title:
Claustin	
Signature:Printed Name:	Title:
Frinted Name.	
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
were the transfer of the control of the State St	L. I :_itad Dautnaushin.
If Florida Limited Partnership or Limited Liabilit	y Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
<del></del>	· •