# 

<del>.</del>	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
,	
Special Instructions to	Filing Officer
ореста изпоснота п	71 ang Omeet.
	N.
1	
1	
Į.	
L	<u></u>

Office Use Only



## Sunshine State Corporate Compliance Company

# 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 07/24/2024	-		#WA	LK IN**
Empiro	International Holdings I.I.C		,,,,	22( 2/
ENTITY NAME Empire	International Holdings LLC		2024	
				******
DOCUMENT NUMBER_			_ 21	entre 1
	**PLEASE FILE THE ATTACHED AN	D RETURN**	## 9: <b>47</b> S.E.T.L.	O
XXXXXXXX	Plain Copy			
	Certified Copy			
	Certificate of Status			
	Certified Copy of Arts & Amendments  Certificate of Good Standing			
	**APOSTILLE' / NOTARIAL CERT	TIFICATION**		
COUNTRY OF DESTINAT	TION			
NUMBER OF CERTIFICA	TES REQUESTED			
TOTAL OWED \$150	ACC	COUNT #: 1201600	000072	
		S 8 Th	G	
Please call Tina at t	he above number for any issues or co	•		

#### COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: EMPIRE INTERNATIONAL HOLI	DINGS LLC	
(Name of Resi	ulting Florida Limited	(Company)
The enclosed Articles of Conversion, Articl Business Entity" into a "Florida Limited Lia		n, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter to:	2024 JUL 24
TUCKER THONI		
(Contact Person)		(/) =
GrayRobinson, P.A.		Air 9: 47
(Finn/Company)		ιο <sub>ς τ</sub> - <del>Δ</del> ο
301 E. Pine Street, Suite 1400		
(Address)		
Orlando, Florida 32801		
(City, State and Zip Code)		
TUCKER.THONI@GRAY-ROBINSON.COM	_	
E-mail Address: (to be used for future annual rep	oort notifications)	
For further information concerning this mat	ter, please call:	
Tucker Thoni	_at ()_t	843-8880
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amoundollars and drawn on a bank located in the t		pressed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  ☐ \$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fe and Certified Copy	Certificate of Status
Mailing Address: New Filing Section Division of Corporations	N D	treet Address:  cw Filing Section  ivision of Corporations
P.O. Box 6327 Tallahassee, FL 32314		he Centre of Tallahassee 415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

#### Articles of Conversion

For

#### "Other Business Entity"

Into

#### Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to			~
"Other Business Entity" into a Florida Limited Liability Company in accordance Statutes.	:: with 8.605,1 :- :-		
1. The name of the "Other Business Entity" immediately prior to the filing of the A EMPIRE INTERNATIONAL HOLDINGS LLC	rticles of Conv	•	बंध्य IS: वि ब्राह्म स्मान
(Enter Name of Other Business Entity)	1	τ. Σ	j
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY  (Enter entity type, Example: corporation, limited partnership, general partnership, co	10 [n]	=======================================	9 3
(Enter entity type. Example: corporation, limited partnership, general partnership, co	mmon law or;bus		st, č <del>to.</del>
First organized, formed or incorporated under the laws of	Γ1.	ţ.7	
(Enter state, or if a non-U.S. entity	the name of the	country)	)
September 5, 2014			
(date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability Company as set forth in the attached a	Articles of Or	ganizat	ion:
EMPIRE INTERNATIONAL HOLDINGS, 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 that	an 90 calendai	r days a	ıfter
the date this document is filed by the Florida Department of State.)			
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	s date will not be	listed as	the
5. The plan of conversion has been approved in accordance with all applicable statut	res		

- 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.

\$5,00 (Optional)

Certificate of Status:

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

	(Must contain the words "Limited Li	iability Company, "L.L.C.," or "LEC.")		
ARTICLE II -				
The mailing ad	dress and street address of th	ne principal office of the Limited Liabili	ty Company i	s:
Principal Offi	ce Address:	Mailing Address:		
301 E. Pine Stre	eet Suite 1400	301 E. Pine Street, Suite 1400	2024 JUL 26	
Orlando, Florida		Orlando, Florida 32801		<u></u>
				e ata pag
		ered Office, & Registered Agent's Sig Registered Agent. You must designate an individual o	,	į.
The name and	the Florida street address of t	the registered agent are:	9	
The name and	the Florida street address of t Tucker Thoni , Esquire	<u> </u>		•
The name and	Tucker Thoni , Esquire	the registered agent are:	Title Jan	
The name and	Tucker Thoni , Esquire	same	Title Jan	
The name and	Tucker Thoni , Esquire N 301 E. Pine Street, Suite	same	Title Jan	
The name and	Tucker Thoni , Esquire N 301 E. Pine Street, Suite	łame 1400	Title Jan	
The name and	Tucker Thoni , Esquire  N  301 E. Pine Street, Suite Florida street address (	1400 (P.O. Box <u>NOT</u> acceptable)	Title Jan	
Having been	Tucker Thoni , Esquire  N  301 E. Pine Street, Suite Florida street address ( Orlando  City  named as registered agent an	Same  1400  (P.O. Box <u>NOT</u> acceptable)  FL 32801  Zip  nd to accept service of process for the abo	ove stated lim	ited
Having been liability c	Tucker Thoni , Esquire  N  301 E. Pine Street, Suite Florida street address ( Orlando  City  named as registered agent and company at the place designate	Name 1400 (P.O. Box NOT acceptable) Fig. 32801 Zip	ove stated limi	Y.

(CONTINUED)

Registered Agent's Signature (REQUIRED)

A	D'1	'n	111	1 1	L'I	W
•	KI	- 1	ι	L	۳. ا	١.

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		
<del></del>		
		7024 JOL 24
		<u> </u>
<del></del>		•
		ي پي
· · · · · · · · · · · · · · · · · · ·		172
(Use attachment if necessary)		
CTICLE V: Other provisions, if any,		
_ <del></del>		
REQUIRED SIGNATURE:		
KINOIKED	/	
//_		

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.

TUCKER THONI, AUTHORIZED SIGNATORY

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)