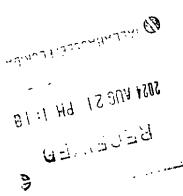
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10	Requestor's Name)	
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(A	Address)	
(C	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	-	
(F	Business Entity Name)	
\-	Jasinosa Erkity (1211)oy	
([Document Number)	
Certified Copies	Certificates of	Status
Special Instructions to Fi	iling Officer:	•
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Office Use Only



900434699819



CT CORP

(850) 656- 4724 3458 lakesore Drive Tallahassee, FL 32312

D	ate:	08/21/2024	- w: DW
		Acc#I2016000007	12 W
Name:	Luxury Le	ather Brands LLC	
Document #:			
Order #:	15829743		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination Number of Certs:	n:
Filing: 🗸	Certifie Plain: COGS:	d: 🗸	Email Address for Annual Report Notifications
Availability Document Examiner Updater Verifier W.P. Verifier	Amoun	t:\$ 185.00	

Thank you!

COVER LETTER

TO:	New Filing Se Division of C					
C 110	LECT. Luxury L	eather Brands LLC				
301	<u> </u>	(Name of Res	sulting Florida L	imited Co	mpany)	_
					nd fees are submitted to accordance with s. 605.	
Plea	se return all corr	espondence concernin	g this matter	to:		
Jenr	nifer Garberich					
		(Contact Person)				
Ben	esch, Friedlander,	Coplan & Aronoff, LLP				- 3
		(Firm/Company)				•
127	Public Square, Su	iite 4900				
		(Address)				.)
Clev	eland, OH 44114					:
	((City, State and Zip Code)	_			?
gpo	lack@ghurka.com	1				- 1
E	-mail Address: (to b	oe used for future annual re	port notification	ns)		
For	further informati	on concerning this ma	tter, please ca	ıll:		
Jeni	nifer Garberich		at (<u>216</u>	, 363	-6248	
	(Name of Conta	act Person)	(Area C	ode) (Da	ytime Telephone Number)	_
		for the following amount a bank located in the			ssed by this office must	be payable in US
(\$25 & \$1	150.00 Filing Fees for Conversion 25 for Articles (ganization)	☐\$155.00 Filing Fees and Certificate of Status	S180.00 Fi	_	■\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee.	ection Corporations 27		New Divis The (2415	et Address: Filing Section sion of Corporations Centre of Tallahassee N. Monroe Street, Sui	te 810

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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 Luxury Leather Brands LLC	Articles 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, or corporation.			
(Enter entity type. Example: corporation, limited partnership, general partnership, of	common law o	or business tru	st, etc.)
First organized, formed or incorporated under the laws of			
(Enter state, or if a non-U.S. ent	ity, the name of	of the country))
8/27/2018 on			
(date of organization, formation or incorporation)		. ,	
3. The name of the Florida Limited Liability Company as set forth in the attached	l Articles o	f Orģaniza	tion:
Luxury Leather Brands LLC			1
(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 to 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, to document's effective date on the Department of State's records.	han 90 cale	- 1	
5. The plan of conversion has been approved in accordance with all applicable stat	utes.		
6. The "Converted or Other Business Entity" has agreed to pay any members having a	ppraisal righ	its the amou	int to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 19th day of August	20_24
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: /S/Gra	nt Y Pollack
Printed Name: Grant Y. Pollack	Title: authorized person
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: /s/Grant Y. Pollack	
Printed Name: Grant Y. Pollack	Title: authorized person
Timed Name. Clark 1, 1 Gladek	True. danoniza person
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Tido
rrimed iname:	True:
Signature:	
Printed Name:	Title:
Signature:	m'.i
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	0.55
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc	
it Directors of Officers have not been selected, an inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	
Signatures of ALL General Partners.	
All others:	
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$25.00 \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
	· •

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Luxury Leather Brar	nds LLC			
		ability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Ad	ldwaan			
		ne principal office of the Limited Liabilit	ty Company	
The maning address	oo and street address of the			
Principal Office A	Addre <u>ss:</u>	Mailing Address:		
125 N. Congress Av	venue. Suite 13	125 N. Congress Avenue, Suite 13		
125 N. Congress Avenue, Suite 13				
Delray Beach, FL 33	3445	Delray Beach, FL 33445		
ARTICLE III - R	egistered Agent, Regist	Delray Beach, FL 33445 ered Office, & Registered Agent's Signate an individual of the second	nature:	
ARTICLE III - R The Limited Liability C business entity with an	egistered Agent, Regist ompany cannot serve as its own active Florida registration.) Florida street address of	ered Office, & Registered Agent's Sig. Registered Agent. You must designate an individual o	nature: or another	
ARTICLE III - R The Limited Liability C business entity with an	egistered Agent, Regist ompany cannot serve as its own active Florida registration.) Florida street address of Grant Y. Pollack	ered Office, & Registered Agent's Sig Registered Agent. You must designate an individual o the registered agent are:	or another	
ARTICLE III - R The Limited Liability C business entity with an	egistered Agent, Regist ompany cannot serve as its own active Florida registration.) Florida street address of Grant Y. Pollack	ered Office, & Registered Agent's Sig. Registered Agent. You must designate an individual o	or another	
The Limited Liability C business entity with an	egistered Agent, Regist ompany cannot serve as its own active Florida registration.) Florida street address of Grant Y. Pollack	ered Office, & Registered Agent's Sig: Registered Agent. You must designate an individual of the registered agent are:	or another	
ARTICLE III - R The Limited Liability C business entity with an	egistered Agent, Regist ompany cannot serve as its own active Florida registration.) Florida street address of Grant Y. Pollack 125 N. Congress Avenue	ered Office, & Registered Agent's Sig: Registered Agent. You must designate an individual of the registered agent are:	or another	
ARTICLE III - R The Limited Liability C business entity with an	egistered Agent, Regist ompany cannot serve as its own active Florida registration.) Florida street address of Grant Y. Pollack 125 N. Congress Avenue	ered Office, & Registered Agent's Signate an individual of the registered agent are: Name , Suite 13	or another	

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..

/S/Grant Y. Pollack
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Glenn C. Pollack
	125 N. Congress Avenue, Suite 13
	Delray Beach, FL 33445
MGR	Grant Y. Pollack
	125 N. Congress Avenue, Suite 13
	Delray Beach, FL 33445
MGR	Marc Kramer
	125 N. Congress Avenue, Suite 13
	Delray Beach, FL 33445
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
/s/Grant Y. Pollack	

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.

Grant Y. Pollack, authorized representative

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)