# 2301440045

	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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2024 OCT 17 /// 9: 47







## 12905 SW 42<sup>nd</sup> ST., Ste: 210 Miami, FL 33175 Phone: 305-444-4994 / 305-444-4977

Email: filing@ecfsfiling.com

÷	2024		
Office Use Only	99	نف .	_
·		•	

CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1. HUSE ENTERPRISES INC

(CORPORATE NAME)

(DOCUMENT #)

2. (CORPORATE NAME)

(DOCUMENT #)

3. (CORPORATE NAME)

(DOCUMENT #)

Walk-In

Pick up time: \_\_\_\_\_\_ | Value | Val

	New Filings
	Profit
	Non-Profit
	Limited Liability
	Other:
$oxed{V}$	CONVERSION

Amendments
Amendments
Resignation
Dissolution/Withdrawal
Other:

Other Filings
Annual Report
Fictitious Name
Apostille:
Other:

Examiners Initials	
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### Articles of Conversion

For

# "Other Business Entity"

Into

### 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 HUSE ENTERPRISES INC.	f the Articles of Conversion is:
(Enter Name of Other Business Entity)	2024 C
2. The "Other Business Entity" is a Corporation	
(Enter entity type. Example: corporation, limited partnership, general partner	ship, common law or business trust, etc')
First organized, formed or incorporated under the laws of	10. 7
(Enter state, or if a non-U.	S. entity, the name of the country)
02/13/2013 on	9 7
on (date of organization, formation or incorporation)	· . ~
3. The name of the Florida Limited Liability Company as set forth in the atta	ched Articles of Organization:
HUSE ENTERPRISES 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 me the date this document is filed by the Florida Department of State.)	ore than 90 calendar days after
Note: If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	ents, this date will not be listed as the
5. The plan of conversion has been approved in accordance with all applicable	e 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.

Signed this 08 day of AUGUST	20_24	
Signature of Authorized Representative of Aim	ited Liability Company:	
Signature of Authorized Representative: Printed Name: SIMON ZENCK	Title: PREISDENT	_
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]	
Signature: SIMON ZENCK		
Printed Name SIMON ZENCK	Title: AMBR	_
Signature:		
Printed Name:	Title:	<del>-</del>
Signature		
Signature:Printed Name:	Title:	- : .
		- ( "
Signature:		- ::-
Printed Name:	Title:	- [12]
Signature:		•
Printed Name:	Title:	-
Signatura		
Signature:Printed Name:	Title:	•
		-
If Florida Corporation:	0.00	
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In-		
If Directors of Officers have not occur selected, an in-	corporator must sign.	
If Florida General Partnership or Limited Liabili	ty Partnership:	
Signature of one General Partner.		
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:	
Signatures of ALL General Partners.	<u>, ,                                  </u>	
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)	
Certificate of Status:	\$5.00 (Optional)	

2024-007 | 7 | 7.1 9: 47

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

HUSE ENTERPRISES LLC	nited Liability Company, "L.L.C.," or "LLC.")	
(,Must contain the words. Lin	inted Diagnity Company, D.D.C., or DEC.	
ARTICLE II - Address:		
The mailing address and street address	s of the principal office of the Limited Lia	ability Company 1
Principal Office Address:	Mailing Address:	
2423 SW 147 Ave #149	2423 SW 147 Ave #149	
MIAMI, FL 33185		<del></del>
	MIAMI, FL 33 193	~ .
ARTICLE III - Registered Agent, R	egistered Office, & Registered Agent's	Signature:
ARTICLE III - Registered Agent, R	egistered Office, & Registered Agent's sown Registered Agent. You must designate an individual	Signature: 17
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as it business entity with an active Florida registration.	egistered Office, & Registered Agent's sown Registered Agent. You must designate an individ	dual or another
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as it business entity with an active Florida registration. The name and the Florida street address	egistered Office, & Registered Agent's sown Registered Agent. You must designate an individ	dual or another
ARTICLE III - Registered Agent, R The Limited Liability Company cannot serve as it business entity with an active Florida registration.	egistered Office, & Registered Agent's sown Registered Agent. You must designate an individual of the registered agent are:	Signature: 17 1: 9:47
ARTICLE III - Registered Agent, R The Limited Liability Company cannot serve as it business entity with an active Florida registration. The name and the Florida street address	egistered Office, & Registered Agent's sown Registered Agent. You must designate an individ	dual or another
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as it business entity with an active Florida registration. The name and the Florida street address	egistered Office, & Registered Agent's sown Registered Agent. You must designate an individual of the registered agent are:  Name	dual or another
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as it business entity with an active Florida registration.  The name and the Florida street address  SIMON ZENCK  2423 SW 147 Ave #	egistered Office, & Registered Agent's sown Registered Agent. You must designate an individual of the registered agent are:  Name	dual or another
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as it business entity with an active Florida registration.  The name and the Florida street address  SIMON ZENCK  2423 SW 147 Ave #	egistered Office, & Registered Agent's sown Registered Agent. You must designate an individual of the registered agent are:  Name	dual 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Α	R	TI	CI	LF.	IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:			
"MGR" = Manager AMBR	SIMON ZENCK 2423 SW 147 Ave #149			
	MIAMI, FL 33185			
<del></del>				
<del>.</del>				
(Use attachment if necessary)		111 9: <b>4</b>		
ICLE V: Other provisions, if any.		<b>67</b>		
REQUIRED SIGNATURE:	emm			
Signature of a member or a				

as provided for in s.817.155, F.S.

SIMON ZENCK

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)