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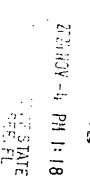
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entry Hame)
(Document Number)
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Control Control
Certified Copies Certificates of Status
Special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

Office Use Only



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COVER LETTER

TO: New Filing So Division of Co					
SUBJECT: Preview	K, LLC				
		sulting Florida Limit	ed Cor	npany)	
				nd fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.	
Please return all corre	spondence concernin	g this matter to:			
Barry E. Haimo, Esq.					
	(Contact Person)				
Haimo Law					
	(Firm/Company)				
Peters Road Ste	B-210	_			
	(Address)				
Plantation, Florida, 333	24				
	ity, State and Zip Code)				
doc@haimolaw.com					
E-mail Address; (to be	e used for future annual re	port notifications)			
For further information	on concerning this ma	tter, please call:			
Barry E. Haimo		_at (954	, 228-	3369	
(Name of Contact	et Person)	(Area Code)	.)(Day	ctime Telephone Number)	
Enclosed is a check for dollars and drawn on			roces:	sed 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 and Certified Cop		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
<u>Mailing Addr</u>	ess:		Stree	t Address:	
New Filing Sc			New	Filing Section	
Division of Co P.O. Box 632			Division of Corporations The Centre of Tallahassee		
1 101 1000 002	•			cities of Tallallasses	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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 Co PreviewX, Inc.	onversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Corporation	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or	business trust, etc.)
First organized, formed or incorporated under the laws of Pennsylvania (Enter state, or if a non-U.S. entity, the name of	the country)
January 28, 2021	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Company as set forth in the attached Articles of Company as set forth in the attached Articles of Company as set forth in the attached Articles of Company as set forth in the attached Articles of Company as set forth in the attached Articles of Company as set forth in the attached Articles of Company as set forth in the attached Articles of Company as set forth in the attached Articles of Company as set forth in the attached Articles of Company as set forth in the attached Articles of Company as set forth in the attached Articles of Company as set forth in the attached Articles of Company as set forth in the attached Articles of Company as set forth in the attached Articles of Company as set forth in the attached Articles of Company as set forth in the attached Articles of Company as set for the Company as set for	Organization:
PreviewX, 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 calend 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 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 which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	s the amount to

Signed this day of	20
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Rocco A. Ciavarella Jr.	Title: President
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Printed Name: Rocco A. Ciavarella Jr.	Title: MGR
Signature: Printed Name: Bryan Hunsinger	
Printed Name: Bryan Hunsinger	Title: MGR
Signature: Printed Name:	Title:
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	
Printed Name:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	
All others: Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:					
The name of the Limite	ed Liability Company	is:			
PreviewX, LLC					
(Must cor	ntain the words "Limited Lia	bility Company, "L.L.C.," or "LL	.C.")		
ARTICLE II - Address an		e principal office of the L	imited Liability Com	npany is:	
Principal Office Addr	ress:	Mailing Address:			
450 Alton Road		450 Alton Road			
Apt. #3301		Apt. #3301			
Miami Beach, Florida 33	139	Miami Beach, Florida	33139	~ 1	
	ida street address of th imo Law Na	ame	SEE. FL	-h PH 1:18	
	Peters Road, Ste				
Fl	orida street address (I	P.O. Box <u>NOT</u> acceptable	2)		
Pla	ntation	FL 33324			
	City	Zip	_		
liability company registered agent and statutes relating to t	at the place designated agree to act in this capthe proper and completions of my position as	ed to accept service of proceed in this certificate. I herefuncity. I further agree to come performance of my duticle begistered agent as provided in the control of the co	by accept the appoint comply with the provi ies, and I am familiar	ment as isions of all with and	

(CONTINUED)

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

<u>Title:</u>	Name and Address:		
MGR	Rocco A. Ciavarella, Jr.		
	450 Alton Road, APT 3301		
	Miami Beach, FL 33139		
"AMBR" = Authorized Member "MGR" = Manager	Bryan Hunsinger		
"AMBR" = Authorized Member "MGR" = Manager MGR MGR (Use attachment if necessary)	14 Jumper Road		
	Dallas, PA 18612		
		~	
		2024 HOV -14	
		===	
(Use attachment if necessary)		¥	
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TICLE V: Other provisions, if any.	17.1		
•	<u> </u>		
•	<u>-13</u>	_	
		$\overline{\mathbf{c}}$	

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 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.

Rocco A. Ciavarella Jr. (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)