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☐ PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer	
	 	

Office Use Only



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24 DEC -4 AM 12: 42

COVER LETTER

TO:	New Filing S Division of C					
SHRI	FCT. FreeFold	Ventures, LLC.				
ЗОВ			sulting Florida Lin	nited Cor	mpany)	
					nd fees are submitted to convert accordance with s. 605.1045, F.S.	
Please	return all corr	espondence concernin	g this matter to	:		
Alinka	Foldesi-Freema	ın				
		(Contact Person)		_		
FreeF	old Ventures LLG	C.				
	-	(Firm/Company)		_		
3826	Cardinal Oaks C	ircle				
	<u>-</u>	(Address)				
Orang	e Park, FL 3206	5				
		City, State and Zip Code)		_		
alinka	f@gmail.com					
Е-г	nail Address: (to b	e used for future annual re	port notifications)	_		
For fu	rther informati	on concerning this ma	tter, please call	:		
Alinka	Foldesi-Freema	ın	_at (<u></u> 973	979-	3214	
	(Name of Conta	act Person)	(Area Cod	e) (Day	ytime Telephone Number)	
		for the following amou a bank located in the		process	sed by this office must be payab	le in US
(\$25 fc & \$125	0.00 Filing Fees or Conversion of for Articles anization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filin and Certified Co		☐S185.00 Filing Fees, Certified Copy, and Certificate of Status	
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee. I	ection Torporations 17		New Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810	24 OEC

Tallahassee, FL 32303

24 DEC -4 AM 12: 42

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: FreeFold Ventures Inc
(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
(Enter state, or if a non-U.S. entity, the name of the country)
January 10, 2022
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
FreeFold Ventures, 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.

Signed this 18th day of November	20 24
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative: Printed Name: Alinka Foldesi-Freeman	Title: MGR
Signature(s) on behalf of Other Business Entity:	
Pri 0 0)
Signature: Printed Name: Alinka Foldesi- Freeman	Title: President
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In-	corporator must sign.
<u>If Florida General Partnership or Limited Liabili</u>	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name		
The name of the Lim	ited Liability Company i	S:
FreeFold Ventures, LL		
(Must e	contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Addı	ress:	
The mailing address	and street address of the	principal office of the Limited Liability Company is:
Determine LOSS		N# - 111 A . A . A
Principal Office Add	<u>aress:</u>	Mailing Address:
3826 Cardinal Oaks Ci	rcle	3826 Cardinal Oaks Circle
Orange Park FL 32065		Orange Park, FL 32065
		
ARTICLE III - Reo	istered Avent. Revister	ed Office, & Registered Agent's Signature:
(The Limited Liability Com	pany cannot serve as its own Reg	gistered Agent. You must designate an individual or another
business entity with an acti	ve Florida registration.)	
The name and the Flo	orida street address of the	e registered agent are:
A	linka Foldesi-Freeman	
<u>: :</u>	Nai	ne
_	826 Cardinal Oaks Circle	
	Florida street address (P.	O. Box NOT acceptable)
0	range Park	FL ³²⁰⁶⁵
_	City	Zip
		to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as
	_	acity. I further agree to comply with the provisions of all
statutes relating to	o the proper and complet	e performance of my duties, and I am familiar with and
accept the oblig	rations of my position as r	regis <u>tered agent</u> as provided for in Chapter 605, F.S
	00	
	W W	
	Registered Agent's Si	gnature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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	Alinka Foldesi-Freeman
WGR	3826 Cardinal Oaks Circle
	Orange Park, FL, 32065
	Olange Falk, FL, 32003
AMBR	Julius Freeman
	3826 Cardinal Oaks Circle
	Orange Park, FL 32065
	<u> </u>
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	
Signature of a member or This document is executed in accordance any false information submitted in a document is a document in	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree for

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)