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(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:
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CORPORATE ACCESS,

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

(850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

		ICK UP: JENA 12/27	
	CERTIFIED COPY		
XX	РНОТОСОРУ		20
	CUS		2024 DEC
XX	FILING	CONVERSION	27
<u> </u>	BAGGAGE AIRLINI CORPORATE NAME AND	E GUEST SERVICES, INC. DOCUMENT #)	M 9: 47
((CORPORATE NAME AND	DOCUMENT #)	
((CORPORATE NAME AND	DOCUMENT #)	
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((CORPORATE NAME AND	DOCUMENT #)	
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((CORPORATE NAME AND	DOCUMENT#)	
PECIAL I	NSTRUCTIONS:		

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.

20	
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Comersion is	ıs:
BAGGAGE AIRLINE GUEST SERVICES, INC.	•
(Enter Name of Other Business Entity)	#25) 1.139
2. The "Other Business Entity" is a Corporation]
(Enter entity type. Example: corporation, limited partnership, general partnership, common haw or business trus	j, etc
First organized, formed or incorporated under the laws of Florida	
(Enter state, or if a non-U.S. entity, the name of the country)	
April 2: 2001	
on April 3, 2001	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organizat	ion:
BAGGAGE AIRLINE GUEST SERVICES 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 a	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 document's effective date on the Department of State's records.	the
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 which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	nt to

Signed this _ 27thday ofDecember20	<u>24</u> .
Signature of Authorized Representative of Limi	ted Liability Company:
Tions	Kell
Signature of Authorized Representative: Printed Name:Travis Kell	Title: Authorized Signatory
Printed Name.	_ Title:Autilonzed Signatory
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Tiaris Kell	
Signature: Printed Name: Travis Kell	Title: Authorized Officer
Printed Name: Travis Ren	Title. Mullotized Officer
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
Filmed Name.	
Signature:	
Signature:Printed Name:	Title:
Cimaran	Title:
Signature:Printed Name:	Title
Signature:	
Signature:Printed Name:	Title: /
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	
	A. D. Annual Inc.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
VII others:	
All others: Signature of an authorized person.	
F	
<u>Fees:</u>	
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

	IEOT OEDVIOED I LO	
BAGGAGE AIRLINE GU		
(Must contain the words "Limited Lia	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	e principal office of the Limite	d Liability Company is
Mailing Address:	Mailing Address:	202
501 Santa Monica Blvd, Suite #200 Santa Monica, CA 90401	501 Santa Monica Blyo Suite #200 Santa Monica, CA 904	· · · · · · · · · · · · · · · · · · ·
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)	ered Office, & Registered Age	ent's Signature:
The name and the Florida street address of t	he registered agent are:	::. 7
CORPORATIONS	SERVICE COMPANY	
N	ame	
4004 HAVO STREE	:T	
1201 HAYS STREE	P.O. Box NOT acceptable)	

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..

Michalla Disbrow

Registered Agent's Signature (REQUIRED)

(CONTINUED)

TALLAHASSEE

City

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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" = ManagerAMBR	ZWB Holdings LLC 501 Santa Monica Blvd, Suite #200 Santa Monica, CA 90401
	2024 DEC 27 (A) 9
(Use attachment if necessary) ARTICLE V: Other provisions, if any.	9.17
REQUIRED SIGNATURE:	Trario Kell

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.

Travis Kell, Authorized Signatory

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 5.00 Certificate of Status (Optional) \$ 30.00 Certified Copy (Optional)