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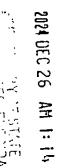
(Degreeste's Name)
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
,
(Document Number)
(Bocament Hamber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W24000149680
VYZ4000177000

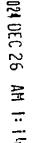
Office Use Only



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RECEIVED

2024 DEC 26 PH 4: 47

SIGNAL MALLAPY MARKET FATE

November 5, 2024

SIOBHAN RODRIGUEZ 586 WHITTINGHAM PL LAKE MARY, FL 32746 US

SUBJECT: TABACU CIGARS Ref. Number: W24000149680

We have received your document for TABACU CIGARS and check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

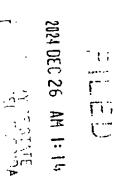
Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Monique K Anderson Regulatory Specialist II

Letter Number: 024A00024312



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.

(Enter Name of Other Busin	ess Entity)
2. The "Other Business Entity" is a	RPORATION
(Enter entity type. Example: corporation, limited p	partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws	of FLORIDA
and in the laws	(Enter state, or if a non-U.S. entity, the name of the country)
11 - 19 - 2012	
(date of organization, formation or incorporation)	
TABACU CIGARS LLC. (Enter Name of Florida Limited Liab	ility Company)
4. If not effective on the date of filing, enter the effection	11 - 19 - 2012 ve date:
the date this document is filed by the Florida Depar Note: If the date inserted in this block does not meet the applicable	ot or filed date nor more than 90 calendar days after tment of State.) c statutory filing requirements, this date will not be listed as the
the date this document is filed by the Florida Depar Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records. The plan of conversion has been approved in accordance.	tment of State.) e statutory filing requirements, this date will not be listed as the

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nam					
The name of the Lin	nited Liability Company	is:			
	TABACU CIGARS LLC	:			
(Must	contain the words "Limited Lia		"L.L.C.," or "LLC.")		
ARTICLE II - Add The mailing address	ress: and street address of the	e principal of	fice of the Limited	l Liability Company is	3:
Principal Office Ad	ldress:	<u>Mailin</u>	g Address:		
586 WHITTINGHAM	PL	586 WH	IITTINGHAM PL		
LAKE MARY FL , 327	46	LAKE M	IARY FL , 32746		
(The Limited Liability Combusiness entity with an act	orida street address of th	egistered Agent.	You must designate an ir	ndividual or another	
_		ime			
E	GO TANINTTINION LANDIN				
_	Florida street address (P	P.O. Box <u>NO</u>	T acceptable)		
L	AKE MARY	FL	32746		
_	City		Zip		
liability compar registered agent ar statutes relating t	ed as registered agent and my at the place designated and agree to act in this cap to the proper and comple gations of my position as	l in this certi, pacity. I furtl te performan	ficate, I hereby acco ner agree to comply ce of my duties, and	ept the appointment as with the provisions of d I am familiar with an	all
	Registered Agent's S	ignature (RE	Wired)	2024 DEC 26	: .
	(CONT	INUED)		AH 1:14	T'.

ARTICLE IV-

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

"AMBR" = Authorized Member	
"MGR" = Manager	010011111111111111111111111111111111111
MGR	SIOBHAN RODRIGUEZ
	586 WHITTINGHAM PL
	LAKE MARY FL , 32746
	-1 , <u>C</u>
	<u></u>
	3.7
(Use attachment if necessary)	7,3
• *	-1
	, <u>**</u>
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	j. fr
LE V: Other provisions, if any.	Á
LE V: Other provisions, if any.	SA -
	Á
PLE V: Other provisions, if any. REQUIRED SIGNATURE:	
	o 1 obhan Radman
REQUIRED SIGNATURE:	o I obhan Rodnym
Signature of a member or a This document is executed in accordance w	in authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware
Signature of a member or a This document is executed in accordance wany false information submitted in a document	o tobhan Rodnynan authorized representative of a member
Signature of a member or a This document is executed in accordance w	in authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware
Signature of a member or a This document is executed in accordance vany false information submitted in a document as provided for in s.817.155, F.S.	in authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware
Signature of a member or a This document is executed in accordance vany false information submitted in a document as provided for in s.817.155, F.S.	in authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware nent to the Department of State constitutes a third degree fe

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