L25000000744

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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12/27/24--01007--017 **150.00



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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.

Statutes.				
1. The name of the WESTRY OVERSE	e "Other Business Entity" immedi AS LIMITED	ately prior to the filing o	of the Articles of Conversion is:	
	(Enter Name of Other Bu	isiness Entity)		
2. The "Other Bus	iness Entity" is a CORPORATION			
(Enter e	entity type. Example: corporation, limite	ed partnership, general partner	ership, common law or business trust, or	ctc.
First organized, for	rmed or incorporated under the lav	ws of	J.S. entity, the name of the country)	
MARCH 29, 2009		(Enter state, or if a non-o	i.s. entry, the name of the country)	
(date of organizati	on, formation or incorporation)			
	e Florida Limited Liability Compa	my as set forth in the atta	ached Articles of Organization	n:
WESTRY OVERSE	AS LLC			
	(Enter Name of Florida Limited L	iability Company)		
(The effective date the date this docu Note: If the date insert	on the date of filing, enter the effee: Cannot be prior to date of recment is filed by the Florida Depted in this block does not meet the applicate on the Department of State's records.	eipt or filed date nor m eartment of State.) cable statutory filing requirem	iore than 90 calendar days aft	
5. The plan of conv	version has been approved in accor	rdance with all applicabl	le statutes.	
	or Other Business Entity" has agree bers are entitled under ss. 605.1006		2024 DEC SECRE) TALLARY	

Signed this 23 day of December 23	20 <u>24</u>
Signature of Authorized Representative of	f Limited Liability Company:
Signature of Authorized Representative:	
Printed Name: Elena Tarasova	Title: Manager
Signature(s) on behalf of Other Business En	tity: [See below for required signature(s)]
Signature:	
Printed Name: Konstantin Ziiatdinov	Title: Authorized Representative
Signature: Printed Name:	
Printed Name	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	Title:
Printed Name:	Title:
Signature:	100.1
Printed Name:	Litle:
If Florida Corporation: Signature of Chairman, Vice Chairman, Direct	or or Other
If Directors or Officers have not been selected.	
If Florida General Partnership or Limited I Signature of one General Partner.	Liability Partnership:
If Florida Limited Partnership or Limited L Signatures of <u>ALL</u> General Partners.	iability Limited Partnership:
All others: Signature of an authorized person.	
Fees:	

Articles of Conversion: \$25.00 \$125.00

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company is:				
WESTRY OVERSEAS LLC (Must contain the words "Limited Liability	Componer 1.1. ("or "I.I.(")		_	
	Company, L.L.C., or LLC.)			
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited	Liability (Compa	ny is:
Principal Office Address:	Mailing Address:			
13841 SW 90TH AVE	13841 SW 90TH AVE		_	
MIAMI, FL 33176	MIAMI, FL 33176			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration.	red Agent. You must designate an in	nt's Signa dividual or an	ture: other	
VALENCIA REGISTERED SEF Name	RVICES, LLC			
75 VALENCIA AVENUE, FOUR				
Florida street address (P.O.				
CORAL GABLES	FL 33134			
City	Zip			
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete part accept the obligations of my position as regional Registered Agent's Signature.	this certificate. I hereby acce by. I further agree to comply erformance of my duties, and istered agent as provided for	pt the app with the p Ham fami	ointmer rovision liar wit r 605, F	nt as ns of all th and
(CONTINU	JED)	SECRETAT ALLAHASI	2024 DEC 27	

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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" = Manager	
MGR	ELENA TARASOVA
_ 	13841 SW 90TH AVE
	MIAMI, FL 33176
<u> </u>	
	· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary)	
(Ose attachment it necessary)	
CLE Va Oth managiniana if and	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
	(n / _)

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.

ELENA TARASOVA

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)



