125000006970

(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:

Office Use Only



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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 01/07/2025			⇔WALK IN⇔
entity name INFIN	HFI LLC		
DOCUMENT NUMBER	}		2025 .1
	PLEASE FILE THE ATTA	ACHED AND RETURN	
<u>xxxxxxxxx</u>	Plain Copy Certified Copy Certificate of Status		
	**PLEASE OBTAIN THE FOLLOW!	•	
	Certified Copy of Arts & Ame Certificate of Good Standing	ndments	
	APOSTILLE' / NOTAR	HAL CERTIFICATION	
COUNTRY OF DESTIN NUMBER OF CERTIFIC			
TOTAL OWED \$150	00	ACCOUNT #: 120160000	072
Please call Tina at	the above number for any is	-	so much!

COVER LETTER

Division of Corporations			
SUBJECT: INFINIFI LLC			
(Name of Res	ulting Florida Limit	ed Comp	any)
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited Li	•		
Please return all correspondence concerning	g this matter to:		203
STEFANIE VAUGHT			2025
(Contact Person)		-	:
INFINIFI LLC			· :
(Firn/Company)		-	:
1401 BEULAH ROAD, SUITE 112			2
(Address)		•	i.7
WINTER GARDEN, FL 34787			
(City, State and Zip Code)		-	
steff@dsvgroup.com			
E-mail Address: (to be used for future annual re	port notifications)	-	
For further information concerning this ma	tter, please call:		
JOELLE CHURIK	_at (<u>800</u>)567-43	997
(Name of Contact Person)	(Area Code)		me Telephone Number)
Enclosed is a check for the following amou dollars and drawn on a bank located in the		orocesse	d by this office must be payable in US
S150.00 Filing Fees (S25 for Conversion & \$125 for Articles of Organization)	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address:		Street.	Address:
New Filing Section			ling Section
·			on of Corporations ontro of Tallahassee
Tallahassee, FL 32314			. Monroe Street, Suite 810
		Tallaha	issee, FL 32303

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization 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 INFINIFI LLC	f Conversion is:
(Enter Name of Other Business Entity)	i di
2. The "Other Business Entity" is a LIMITED LIABLITY COMPANY (Enter entity type. Example: corporation, limited partnership, general partnership, common law	:
(Enter entity type. Example: corporation, limited partnership, general partnership, common lav	v or business trust, etc.)
First organized, formed or incorporated under the laws of	:
(Enter state, or if a non-U.S. entity, the nam	
AUGUST 20, 2020	Ļ 7
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles INFINIFI LLC	of Organization:
(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 cathe 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 wild 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 315t day of December	_20 <u>24</u>
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Suite Printed Name: Stelante Vaught	Title: Member
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Stefane Voucht	上
Printed Name: Stefanie Vausht	Title: Mombae
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature: Printed Name:	Title
Triffed (Name.	: itte.
Signature:Printed Name:	Tid
rrinted ivame:	11116:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ity Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ity Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
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

INFINIFI LLC	1 Liability Company, "L.L.C.," or "LLC.")	
(Musi contain the words - Limited	i Liability Company, L.I., or Lite.	
ARTICLE II - Address:		
The mailing address and street address of	f the principal office of the Limited Liabi	lity Company is:
		20
Principal Office Address:	Mailing Address:	
1401 BEULAH ROAD	1401 BEULAH ROAD	:
SUITE 112	SUITE 112	:
WINTER GARDEN, FL 34787	WINTER GARDEN, FL 34787	 ·
ARTICLE III - Registered Agent, Regi	istered Office, & Registered Agent's S	ignature: ِر
The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	Am Registered Agent. You must designate an individua	•••
cusiness carry with an active Plotitia registration.)		. 7
The name and the Florida street address of	of the registered agent are:	
STEFANIE VAUGHT	т	
	Name	
	Name	
1401 BEULAH ROAD,	SUITE 112	
Florida street addres	ss (P.O. Box NOT acceptable)	
WINTER GARDEN	FL ³⁴⁷⁸⁷	
City	Zip	

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

"AMBR" = Authorized Member		
"MGR" = Manager	DCV CDOUR INC	
MGR	DSV GROUP, INC. 1401 BEULAH ROAD, SUITE 112	
	WINTER GARDEN, FL 34787	_
	PANALES GALACIA, 1 E 347 07	
		
		_
(Use attachment if necessary)		
• •		
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CLE V: Other provisions, if any.		
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CLE V: Other provisions, if any.		
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CLE V: Other provisions, if any.	, and	
CLE V: Other provisions, if any.	cunt	
REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member	
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance.	e with section 605.0203 (1) (b), Florida Statutes. I am awa	ire!
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a doct	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am awaiment to the Department of State constitutes a third degree	ire (
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155, F.S.	e with section 605,0203 (1) (b), Florida Statutes, I am awa iment to the Department of State constitutes a third degree	are !
REOUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155, F.S.	e with section 605,0203 (1) (b), Florida Statutes, I am awa iment to the Department of State constitutes a third degree	ire :
REOUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155, F.S.	e with section 605.0203 (1) (b), Florida Statutes. I am awa	ire !