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67/10/24--01003--1ALLAHASSEE, FL

COVER LETTER

Division of C							
SUBJECT: Knotfinish	ned Woodworking, LLC						
30bjEc1	(Name of Res	ulting Florida Lin	nited Cor	npany)			
	s of Conversion, Artic a "Florida Limited Li	~					іет
Please return all corre	espondence concernin	g this matter to	:				
Daniel S. Friebis							
	(Contact Person)						
Friebis & Associates							
	(Firm/Company)						
3890 Turtle Creek Driv	e Suite B				;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	2024	
	(Address)				E	J	
Port Orange, FL. 3212	7				-KRASSÉE, FL	2024 JUL 10	e-section (Parkets
((City, State and Zip Code)		_		Ω Ω) /	
dan.friebis@friebisand	assoc.com				بار 141-	3	
E-mail Address: (to b	e used for future annual re	port notifications)			F.33	÷	
For further information	on concerning this ma	tter, please call	:		t + j	7	
Daniel S. Friebis		at (³⁸⁶	492-	7915			
(Name of Conta	ct Person)	(Area Cod	e) (Day	vtime Telephone Numbe	r)		
	or the following amou a bank located in the		proces	sed by this office mu	ist be payab	ole in U:	S
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filir and Certified C		☐\$185.00 Filing Fee: Certified Copy, and Certificate of Status	s.		
Mailing Addi New Filing So Division of C P.O. Box 632	ection orporations		New Divis	t Address: Filing Section ion of Corporations Centre of Tallahassec	:		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Taliahassee, FL 32314

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: Knotfinished Woodworking, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the name of the country)
11/22/2019 on
(date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organizations
Knotfinished Woodworking, LLC
(Enter Name of Florida Limited Liability Company) 4. If not effective on the date of filing, enter the effective date: 07/10/2024
(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.

\$25.00

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Articles of Conversion:

Certificate of Status:

Certified Copy:

Fees for Florida Articles of Organization:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Knotfinished Wood	dworking, LLC		
		Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - A	Address:		
The mailing addr	ress and street address of	the principal office of the Limited	Liability Company is:
Principal Office	Address:	Mailing Address:	
5713 US Highway	1	5713 US Highway 1	
Mims, FL. 32754	•	Mims, FL. 32754	
	-	Willis, T.E. 02704	
		Willia, I L. 02/04	
The Limited Liability business entity with a	Registered Agent, Regis Company cannot serve as its own in active Florida registration.) e Florida street address of	stered Office, & Registered Ager Registered Agent. You must designate an in	dividual or innother 12
The Limited Liability business entity with a	Company cannot serve as its own active Florida registration.) e Florida street address of Bryan Folsom	tered Office, & Registered Ager Registered Agent. You must designate an in the registered agent are:	dividual or another PU
The Limited Liability business entity with a	Company cannot serve as its own active Florida registration.) e Florida street address of Bryan Folsom	stered Office, & Registered Ager Registered Agent. You must designate an in	dividual or another PU
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The Limited Liability business entity with a	Company cannot serve as its own active Florida registration.) e Florida street address of Bryan Folsom 3784 Grove View Lane	tered Office, & Registered Ager Registered Agent. You must designate an in the registered agent are:	dividual or innother 12
The Limited Liability business entity with a	Company cannot serve as its own active Florida registration.) e Florida street address of Bryan Folsom 3784 Grove View Lane	etered Office, & Registered Ager Registered Agent. You must designate an in the registered agent are: Name	dividual or another PU

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:

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Bryan Folsom	
	3784 Grove View Lane	
	Port Orange, FL. 32129	
MGR	Eugene S Folsom	
	761 Hawks Ridge Road	
	Port Orange, FL. 32127	·
		2024
	<u>.</u>	· · /
(Use attachment if necessary)		∰. 10
		(γ) ***
		SEI AM
TICLE V: Other provisions, if any.		ည်းလို့ ကို
		<u>=2</u>

REQUIRED SIGNATURE:

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.

Bryan Folsom

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)