# L25000007529

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

Office Use Only



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### AFFIDAVIT AND ASSIGNMENT OF FLORIDA LLC NAME Satori Group USA, LLC

For good and valuable consideration, the undersigned. James Anderson, as Manager of Satori Group USA, LLC, a Florida limited liability company ("Assignor") executes this Assignment this 12 day of December 2024, and by execution hereof the Assignor hereby states as follows:

- I am the manager of Satori Group USA, LLC, a Florida limited liability company,
   filed August 12, 2024, under Document Number L24000354046.
- I no longer wish to do business under this name and authorize the release of the name for purposes of filing Articles of Conversion of my Texas company.
- 3. Thereby assign and transfer all right, title and interest of the corporate name Satori Group USA, LLC, a Florida limited liability company, to Satori Group USA, LLC, a Texas limited liability company ("Assignee").

Satori Group USA, LLC, a Florida limited liability company

By: James Anderson, as its Manager

STATE OF <u>FLOU</u> SSE

The foregoing instrument was sworn to and acknowledged before me, an officer duly authorized in the State and County aforesaid, by means of M physical presence, or [ ] online notarization, this /2 day of Ole ... 2024, by James Anderson, as Manager of Satori Group USA, LLC, a Florida limited liability company, who executed the foregoing instrument and who did take an oath.

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WITNESS my hand and official seal in the County and State last aforesaid this 2024.

NOTARY PUBLIC USE Herdrix (Typed/printed name) Notary Commission No.: HH OSE JES

My Commission Expires:

Personally Known or Produced Identification
Type of Identification Produced Honda

LISA HENDRIX
MY COMMISSION # HH 058489

EXPIRES: January 15, 2025

Sonded Thru Notary Public Underwriters

#### **COVER LETTER**

Division of Corporations		
SUBJECT: Satori Group USA, LLC		
(Name of Res	sulting Florida Limit	ed Company)
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited L	les of Organization	on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence concernin	g this matter to:	
James Anderson		
(Contact Person)		
(Firm/Company)		
42461 Cascade Drive		
(Address)		
Babcock Ranch, FL 33982		
(City, State and Zip Code)	<del></del> -	
James@satorigroupusa.com		
E-mail Address: (to be used for future annual re	port notifications)	
For further information concerning this ma	itter, please call:	
James Anderson	at ( <sup>757</sup>	(Daytime Telephone Number)
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amou dollars and drawn on a bank located in the	.int: (All checks p United States)	rocessed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$180,00 Filing and Certified Cop	
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## 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:  Satori Group USA, LLC	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, et	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, et	ic.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, the name of the country)	
September 21, 2021  (date of organization, formation or incorporation)	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the <b>attached Articles of Organization</b> Satori Group USA, LLC	1:
(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 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.

Signed this 12 day of December	20 24.		
Signature of Authorized Representative of Limit			
Signature of Authorized Representative: Printed Name: James Anderson	Title: Member	_	
Signature(s) on behalf)of Other Business Entity: [	See below for required signature(s)		
Signature: Printed Name: Jámes Anderson	Title: Member	- -	
Signature:Printed Name:	Title	_	
Signature:Printed Name:	_ Title:	_ _	
Signature:Printed Name:		- 60 -	
Printed Name:	Title:		
Signature:Printed Name:	Title:	) 1	1 2 1 2 1
Signature:		_ <del>(3)</del>	157
Signature: Printed Name:	Title:	FM 11: 29	,
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of the Directors or Officers have not been selected, an Inc.	Officer. corporator must sign.	(F) (S)	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:		
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ty 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

ARTICLE 1 - Name: The name of the Limited Liability Company is	s:
Satori Group USA, LLC	
(Must contain the words "Limited Liabil	lity Company, "L.L.C" or "LLC.")
ARTICLE II - Address:	1 1 07 Cal. I be it d Dishiller Common ist
The mailing address and street address of the p	orincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
42461 Cascade Drive	42461 Cascades Drive
Babcock Ranch, FL 33982	Babcock Ranch, FL 33928
(The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.)  The name and the Florida street address of the James Anderson  Name	registered agent are:
City	Zip
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cape statutes relating to the proper and complete accept the obligations of my position as r	to accept service of process for the above stated limited in this certificate. I hereby accept the appointment as acity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and registered agent as provided for in Chapter 605, F.S

(CONTINUED)

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

	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	L. Androne
MGR	James Anderson
	42461 Cascade Drive  Babcock Ranch, FL 33982
	Badcock Ranch, FL 33962
	vo.
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	717
(Use attachment if necessary)	
(Ose uniterment is necessary)	· ·
LE V: Other provisions, if any.	
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LE V: Other provisions, if any.  REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:  Signature of a member or	r an authorized representative of a member
Signature of a member or	e with section 605,0203 (1) (b), Florida Statutes, I am aware (
Signature of a member or	r an authorized representative of a member te with section 605.0203 (1) (b). Florida Statutes, I am aware tument to the Department of State constitutes a third degree fe

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)