(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	 .
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **P: 866.625.0838 F: 866.625.0839** COGENCYGLOBAL.COM

Account#: I20000000088
If there are any issues
please contact Cheyanne at
850-202-1882

Date:	01/10/2025				
Name:	Cheyanne	Davis			~
Reference i	_{#:}	3941	<u></u>		2025 JAN
Entity Name	e:	SHOP LOC	HOLDINGS, I	LLC	- 5
✓ Artic	les of Incorporatio				O MY SEPTEMENT OF SCHOOL STATE
☐ Char	nge of Agent				
☐ Rein	statement				
✓ Conv	version				
☐ Merg	jer				
Disse	olution/Withdrawal	I			
☐ Fictit	ious Name				
Othe	r				
Authorized :		\$150.00			
Signature: _	Uhyma a	ine			

COGENCY GLOBAL INC. 10 E 40™ ST, 10™ FL NY, NY 10016 D: +1.212.947.7200 P: 800.944.6607 COGENCY GLOBAL (UK) LIMITED
REGISTERED IN ENGLAND & WALES.
REGISTRY #80107/2
6 LLOYDS AVE, UNIT 4Ct.
LONDON EC3N 3AX
444 (0)20.3961.3080

COGENCY GLOBAL (HK) LIMITED A HONG KONG LIMITED COMPANY UNIT B, 1/F, LIPPO LEIGHTON TOWER 103 LEIGHTON RD, CAUSEWAY BAY HONG KONG

COVER LETTER

TO:	New Filing Se Division of Co					
CITE:	Љ СТ:	Shop	Loc	Holding	s, LLC	
301	EC1	(Name of Res	ulting	Florida Lit	nited Cor	npany)
The e Busin	enclosed Articles ness Entity" into	s of Conversion, Artic a "Florida Limited Li	les of ability	Organiza y Compa	ition, an ny" in a	nd fees are submitted to convert an "Othe accordance with s. 605.1045, F.S.
Pleas	e return all corre	espondence concernin	g this	matter to	:	
	1	Danielle Teague				
		(Contact Person)		-	_	
-		(Firm/Company)			_	
		PO Box 159			_	
		(Address)				
	Thor	notosassa, FL 33592	2			
	((City, State and Zip Code)				
	daniellet@)apexinternationalsa	is.cor	n		
E-	mail Address: (to b	e used for future annual re	port no	tifications)	
For f	urther informati	on concerning this ma	tter, p	lease cal	l:	
	Daniell	e Teague	at (919	}	884-7858
	(Name of Conta	ct Person)		(Area Cod	le) (Da	ytime Telephone Number)
		or the following amou a bank located in the				sed by this office must be payable in US
(\$25 f & \$12	50.00 Filing Fees for Conversion 25 for Articles ganization)	\$155.00 Filing Fees and Certificate of Status		180.00 Fili Certified C	_	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee,	ection corporations 7			New Divis The (2415	et Address: Filing Section sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 thassee 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.

Statutes.			~
The name of the "Other Business Entity" immediately Shop Loc Holdings, LLC	prior to the filing of the Articles of	Conversion	0255 JAN
(Enter Name of Other Business			To:
2. The "Other Business Entity" is a	Limited Liability Company	3VE	ō
(Enter entity type. Example: corporation, limited part	nership, general partnership, common law	or business	trust (etc.)
First organized, formed or incorporated under the laws of	North Carolina		<u>ء</u> –
(E	nter state, or if a non-U.S. entity, the name	of the coun	try)1
05/11/2011			
(date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability Company as	set forth in the attached Articles	of Organi	zation:
Shop Loc Holdings, LLC			
(Enter Name of Florida Limited Liability	y Company)		
4. If not effective on the date of filing, enter the effective			
(The effective date: Cannot be prior to date of receipt		endar da;	ys after
the date this document is filed by the Florida Departm			
Note: If the date inserted in this block does not meet the applicable s document's effective date on the Department of State's records.	tatutory filing requirements, this date will	not be listed	as the
5. The plan of conversion has been approved in accordance	e with all applicable statutes.		
6. The "Converted or Other Business Entity" has agreed to p which such members are entitled under ss. 605.1006 and	• •	this the am	iount to

Signed this16	_ day of _DECEMBER	20 24		
Signature of Autho	rized Representative of I	Limited Liability	Company:	
Signature of Authori	ized Representative	Title	Manager	
			_	_
	alf of Other Business Enti	ty: See below for	≯equired signature(s)	
Signature:	Greg E. Lindberg	Tislas	Manager	- 25
Printed Name:	Greg E. Elitolog	ritte:	West aligner	725
Signature:		7.1		
Printed Name:		1 itle:		- 治
Signature:				_ 5
Printed Name:		Title:		
Signature:			· · · · · · · · · · · · · · · · · · ·	9: 47 E.FL
Printed Name:		Title:	- 	- · 🖺 🔫
Signature:				_
Printed Name:		Title:		
Signature:				_
Printed Name:		Title:		
If Florida Corporat Signature of Chairma If Directors or Office	tlon; an, Vice Chairman, Directo ers have not been selected, a	r, or Officer. an Incorporator mus	st sign.	
If Florida General Signature of one Gen	Partnership or Limited L. neral Partner.	ability Partnership	<u>o:</u>	
If Florida Limited ! Signatures of ALL C	Partnership or Limited Li General Partners.	ability Limited Pa	rtnership:	
All others: Signature of an author	orized person.			

\$25.00

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Fees:

Articles of Conversion:

Certificate of Status:

Certified Copy:

Fees for Florida Articles of Organization:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Thono	PO Box notosassa	imited Lia	92 Signature	TO THE STATES
Thona	e of the L Address: PO Box notosassa Registere	imited Lia × 159 a, FL 3359	92 Signature	TO ME STATE
Thone	PO Box notosassa Registered a must design	x 159 a, FL 3359 d Agent's	92 Signature	TO ME STATE
Thone	PO Box notosassa Registered a must design	x 159 a, FL 3359 d Agent's	92 Signature	TO ME STATE
e, & R	notosassa Registered I must design	a, FL 3359	Signature	MI S. W.
e, & R	Registere i must design	d Agent's	Signature	:
e, & R	Registere i must design	d Agent's	Signature	:
. INC.				
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<u>L</u>	32301	_		
	Zip			
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		<u></u>		
er ur na d	tifica ther ince agen	tificate, I here ther agree to ince of my dut agent as provi	tificate, I hereby accept to ther agree to comply with ance of my duties, and I a agent as provided for in the ant Secretary	service of process for the above statificate, I hereby accept the appoint the agree to comply with the province of my duties, and I am familiar agent as provided for in Chapter 60 ant Secretary

	•	***	~		***
А	к	. I I		L.F.	IV.

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	Greg E. Lindberg
WOK	10652 Broadland Pass
	Thonotosassa, FL 33592
	
	<u> </u>
(Heaptrachment if negaciany)	
(Use attachment if necessary)	E TAIE
FICLE V: Other provisions, if any.	
<u> </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.

Greg E. Lindberg

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)