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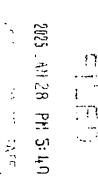
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W24000164163 1-28-25

Office Use Only



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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 13, 2024

in a second of

WILSON E. ENNIS III 500 WESTOVER DR. #61106 SANFORD, NC 27330 US

SUBJECT: GOLDENTABLE INVESTMENT GROUP LLC.

Ref. Number: W24000164163

We have received your document for GOLDENTABLE INVESTMENT GROUP LLC. and check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The printed name and signature on behalf of the "Other Business Entity" is missing from the document. Please place the printed name and signature on the designated lines.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Monique K Anderson Regulatory Specialist II

Letter Number: 024A00027137

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#### **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

(Enter Name of Other I	Business Entity)	·
2. The "Other Business Entity" is a Limited Liability	Corporation	
(Enter entity type. Example: corporation, limit	ted partnership, general partners	ship, common law or business trust, etc.)
First organized, formed or incorporated under the la	Illinois, USA	
02/01/2018 on	(Enter state, or if a non-U.S	6. entity, the name of the country)
(date of organization, formation or incorporation)		
3. The name of the Florida Limited Liability Comp Goldentable Investment Group LLC.		
(Enter Name of Florida Limited I	Liability Company)	·
4. If not effective on the date of filing, enter the effective date: Cannot be prior to date of red the date this document is filed by the Florida Der	wint on Clad 1	<del></del>
the date this document is filed by the Florida Der Note: If the date inserted in this block does not meet the applie document's effective date on the Department of State's records	at thent of State.)	ets, this date will not be listed as the
5. The plan of conversion has been approved in acco	rdance with all applicable :	statutes.
6. The "Converted or Other Business Entity" has agree which such members are entitled under ss. 605.1006	d to pay any members having and 605,1061-605,1072. F	ng appraisal rights the amount to
		2025
		<u>, i</u>
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		<u> </u>

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Signed this Fifth day of December	20
Signature of Authorized Representative of Li	
1/	, company.
Signature of Authorized Representative:	
Printed Name: Wilson E. Ennis III	Title: CEO
Signature(s) on behalf of Other Pusinger Fuel	10
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Signature: Wilson E. Ennis III	Title: CEO
Printed Name:	
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
Signature:Printed Name:	<del></del>
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title
Signature:Printed Name:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	0.05
If Directors or Officers have not been selected, an Ir	Officer.
If Florida General Partnership or Limited Liabil	ity Partnership:
Signature of one General Partner.	
If Florido Limited Days	ı
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ity Limited Partnership:
organizates of PADE Octional Latitions.	i
All others:	
Signature of an authorized person.	
	ŀ
Fees:	
Articles of Comme	'
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization: Certified Copy:	\$125.00
Certificate of Status:	\$30.00 (Optional)
Serumente of Status.	\$5.00 (Optional)

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADTICLELA	
<b>ARTICLE I - Name:</b> The name of the Limited Liability Comp	pany is:
Goldentable Investment Group LLC.	
(Must contain the words "Limite	ed Liability Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Address: The mailing address and street address o	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6049 East Wingate St.	500 Westover Dr. #61106
Inverness, FL 34452	Sanford, NC 27330
The name and the Florida street address of Wilson E. Ennis III	of the registered agent are:
	Name
6049 East Wingate St.	
Florida street addres	ss (P.O. Box <u>NOT</u> acceptable)
Inverness	FL <sup>34452</sup>
City	Zip
registered agent and agree to act in this statutes relating to the proper and com	t and to accept service of process for the above stated limited ated in this certificate. I hereby accept the appointment as capacity. I further agree to comply with the provisions of all uplete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

#### ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
MGR	Wilson E. Ennis III	
	6049 East Wingate St	
	Inverness, FL 34452	
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<del></del>		
(Use attachment if necessary)	٠	2005
ICLE V: Other provisions, if any.	r	원: 28 28
		<u>~</u> 고
	<del></del>	rı _
REQUIRED SIGNATURE:		<del>.</del>
_ Vla	·, -	_
Signature of a member or an This document is executed in accordance wit any false information submitted in a documen as provided for in s.817.155, F.S.	authorized representative of a member h section 605.0203 (1) (b), Florida Statutes. I am awar t to the Department of State constitutes a third degree	e that
Wilson E. Ennis III	1	
Typed	or printed name of signee	<del></del>
	Filing Fees	l Age