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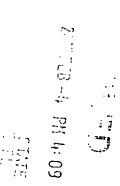
(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
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PICK-UP	TIAW [MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to I	Filing Officer:	





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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Holistikid, LLC		
(Name	of Resulting Florida Limited	Сопралу)
The enclosed Articles of Conversion, Business Entity" into a "Florida Limit	Articles of Organization ted Liability Company"	n, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S.
Please return all correspondence conc	erning this matter to:	
Joseph Rosen		
(Contact Person)		
Joseph J. Rosen PA		
(Firm/Company)		
5030 Champion Blvd., Suite G11-238		
(Address)		
Boca Raton, Florida 33496		
(City, State and Zip C	Code)	
theholistikid@gmail.com		
E-mail Address: (to be used for future an	mual report notifications)	
For further information concerning th	is matter, please call:	
Joseph Rosen	at (581)	638-8593
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following dollars and drawn on a bank located i	amount: (All checks pront the United States)	ocessed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\frac{1}{2}\$\$ \$155.00 Filing and Certificate of Status		-
Mailing Address:	S	treet Address:
New Filing Section		lew Filing Section
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314		415 N. Monroe Street, Suite 810
		'allahassee, FL 32303

INHS11 (7/17)

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.

Holistikid, LLC (Enter Name of Other Business Entity)	
The "Other Business Entity" is a limited liability company (First antity have Example: companion limited partnership general partnership common law.)	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law	w or business trust, etc.)
First organized, formed or incorporated under the laws of	 -
(Enter state, or if a non-U.S. entity, the name	ic of the country)
April 12, 2016 on .	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles	of Organizātion:
Holistikid, LLC	- ; - ;
(Enter Name of Florida Limited Liability Company)	يً اب
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 ca	lendar days after 🔝
the date this document is filed by the Florida Department of State.)	سور <u>ج</u> (د .
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.	एड 09
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 ri which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	ghts the amount to

Signed this 16th day of December	2024
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:	Title: Manager
Signature(s) on behalf of Other Business Entity:	
Signature: The R	
Printed Name: Andrew Lunt	Title: Manager
Signature: Printed Name:	
Printed Name:	Title:
6.	
Signature: Printed Name:	Title
rimed Name.	
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
α.	
Signature: Printed Name:	T:41
Printed Name:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc. If Florida General Partnership or Limited Liabilia	corporator must sign.
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership;
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Holistikid, LLC		
	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of	the principal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
616 SW 17th Street		
Fort Lauderdale, Florida 33315		
		_ `
		(1; —1)
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida extreet address of	stered Office, & Registered Agen n Registered Agent. You must designate an in	it's Signature:
(The Limited Liability Company cannot serve as its own	stered Office, & Registered Agen n Registered Agent. You must designate an in	it's Signature:
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	stered Office, & Registered Agent Registered Agent Nou must designate an in-	it's Signature:
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address o	stered Office, & Registered Agen n Registered Agent. You must designate an in	it's Signature:
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address o	stered Office, & Registered Agent Registered Agent Nou must designate an in-	it's Signature:
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Andrew Lunt 616 SW 17th Street	stered Office, & Registered Agent Registered Agent Nou must designate an in-	it's Signature:
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Andrew Lunt 616 SW 17th Street	stered Office, & Registered Agent Registered Agent Registered Agent. You must designate an institute of the registered agent are: Name	it's Signature:

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)

Title: AMBR* = Authorized Member	Name and Address:
MGR" = Manager MGR	Andrew Lunt
	616 SW 17th Street
	Fort Lauderdale, Florida 33315
<u></u>	
Use attachment if necessary)	
ose attachment ir necessary)	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	- /
	and be

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

ARTICLE IV-

Approval of Plan of Conversion for Holistikid, LLC to a Florida Limited Liability Company

This **Plan of Conversion** (the "Plan" or "Plan of Conversion") for Holistikid, LLC, a California limited liability company is made subject to the terms and conditions set forth below.

RECITALS:

WHEREAS, Holistikid, LLC was initially organized as a California domestic limited liability company on April 12, 2016 ("Holistikid LLC");

WHEREAS, the sole member, owner and manager of Holistikid LLC is Andrew Lunt ("Andrew Lunt");

WHEREAS, in accordance with the provisions of section 17710.02 of the California Revised Uniform Limited Liability Act (the "California Act"), Holistikid LLC desires to convert itself into a Florida limited liability company.

WHEREAS, Holistikid LLC, as a foreign converting entity, seeks to convert itself into a Florida limited liability company as prescribed under the provisions of section 605.1043(3), Florida Statutes, and such other applicable provisions of the Florida Revised Limited Liability Company Act, Chapter 605, Florida Statutes (the "Florida Act");

NOW, THEREFORE, Holistikid LLC hereby approves this Plan of Conversion in the following manner:

- 1. All of the above recitals are true and correct and incorporated herein.
- 2. Holistikid, LLC shall be converted into a Florida limited liability company as provided under the provisions of the California Act and the Florida Act.
- 3. Once converted in the manner set forth in this Plan, Holistikid LLC shall be named "Holistikid, LLC", a Florida limited liability company (the "Florida LLC").
- 4. As of the date of the conversion of Holistikid LLC into the Florida LLC, each of the Members of Holistikid LLC will receive a percentage interest in the profits and capital of the Florida LLC which is equal and the same to that of the Member's percentage interest in the profits and capital of Holitkid.
- 5. All terms and provisions of the California Act will hereby expressly be complied with in order to make this Plan fully effective.

- All terms and provisions of the Florida Act will hereby expressly be complied with in order to make this Plan fully effective.
- 7. Andrew Lunt, as Manager of Holistikid, LLC, shall have the authority to take any act and/or execute any document which is in furtherance of the subject Plan of Conversion, or which may be necessary to make this Plan fully effective.

Approved and Acknowledged:

MANAGER:

Name: Andrew Lunt.

Title: Manager Holistikid, LLC

SOLE MEMBER:

Andrew Lunt

Dated: January 9th, 2025.

Dated: January 9

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