# 177000019097

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

Office Use Only



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12/28/21-+01016-+013 \*+155.00

#### COVER LETTER

TO:	New Filing Sect Division of Con	ion porations		
CUDI	ECT: 111palmbay	LLC		
SODI	EC1	(Name of Result	ing Florida Limited	ed Company)
Busin	ess Entity" into a	"Florida Limited Liao	illity Company	on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Pleas	e return all corresp	oondence concerning t	ing matter ter	
Visha	I P Pandya			-
		(Contact Person)		
5501	seminaryrd#1315-s	LLC		-
		(Firm/Company)		
4021	Dragonfly Drive			_
		(Address)		
West	Melbourne, FL, 32			_
		ty, State and Zip Code)		
111p	almbayllc@gmail.c	om 		_
E	-mail Address: (to be	used for future annual rep	ort notifications)	
For	further informatio	n concerning this matt		
vish	al p pandya		_at ( <u></u>	) 485-6222 e) (Daytime Telephone Number)
	(Name of Contac	t Person)		
Enc doll	losed is a check fo ars and drawn on	or the following amous a bank located in the U	nt: (All checks p United States)	processed by this office must be payable in US
(\$25 & \$1	150.00 Filing Fees for Conversion (25 for Articles rganization)	₹155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop	
	Mailing Addi New Filing So Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



January 6, 2022

VISHAL P PANDYA 5021 DRAGONFLY DR WEST MELBOURNE, FL 32904

SUBJECT: 111PALMBAY LLC Ref. Number: W22000001339

We have received your document for 111PALMBAY LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Certificate of Conversion must be signed by an authorized person.

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.

Jessica A Fason Regulatory Specialist II Letter Number: 022A00000366

2022 (1818)

#### **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.	
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of 5501seminaryrd#1315-s LLC	f Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a (Enter entity type. Example: corporation, limited partnership, general partnership, common law Commonwealth of Virginia  First organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the nan-	
June, 22, 2018  (date of organization, formation or incorporation)  (Enter state, or if a non-U.S. entity, the nan-	ne of the country)
(date of organization, formation or incorporation)  3. The name of the Florida Limited Liability Company as set forth in the attached Article  111palmbay LLC	s of Organization:
(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 of 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 we 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 which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	rill not be listed as the
	~>
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	· : :

Signed this 21st day of december	20
Signature of Authorized Representative of Limite	ed Liability Company:
Signature of Authorized Representative:Printed Name: Vishal P Pandya	Title: MGR
Signature(s) on behalf of Other Business Entity: IS  Signature: Whale have  Printed Name: VISHAL P PAMYA	See below for required signature(s)
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	Officer. corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabil Signatures of ALL General Partners.	ity 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

ARTICLES OF ORGANIZATION FOR ARTICLE I - Name: The name of the Limited Liability Company	
111palmbay LLC (Must contain the words "Limited Liab	sility 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:
4021 Dragonfly drive West Melbourne, FL 32904	West Melbourne, FL 32904
(The Limited Liability Company cannot serve as its own so business entity with an active Florida registration.)	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
The name and the Florida street address of the	he registered agent are:
Registered Agents Inc.	
N	ame
7901 4th St N STE 300	
Florida street address (	P.O. Box NOT acceptable)
St. Petersburg	FL <sup>33702</sup>
City	Zip

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:

Title:	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager MGR	Vishal P Pandya		
MGR	4021 Dragonfly Drive		
	West Melbourne, FL 32904		
MCD	Bhagyashree V. Kulkarni		
MGR	4021 Dragonfly Drive		
	West Melbourne, FL 32904		
	39		
(Use attachment if necessary)	<del></del>		
	<u></u>		
ARTICLE V: Other provisions, if any.	9		
	50-		
REQUIRED SIGNATURE:	,		
Nishal 1	bandya 12/21/2021		
	<i>U</i>		
Signature of a member of This document is executed in accordar any false information submitted in a do as provided for in s.817.155, F.S.	or an authorized representative of a member nee with section 605,0203 (1) (b), Florida Statutes, I am aware that becoment to the Department of State constitutes a third degree felony		
	m I winted name of signee		
<del>-</del>	Typed or printed name of signee		
	Filing Fees		

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 5.00 Certificate of Status (Optional) \$ 30.00 Certified Copy (Optional)