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	Requestor's Name)	
(Requestor's (vame)	
(Address)	
	Address)	
	City/State/Zip/Phone #)	
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PICK-UP	WAIT	MAIL
	Business Entity Name)	
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(Document Number)	
Certified Copies	Certificates of	Status
Special lastructions to 5	Chan Officer	· -
Special Instructions to F	ming Officer:	

Office Use Only



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2023 AUG TO PH 5: 24



FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

EXAMINIER'S INITIALS:____

Please use funds from this accou	nt: 120210000160 <u>155.00</u>
Authorization Signature: Cee and Fee, LLC	2-
Business Name	Doc. #
Certified Copy of ARTICLES	
X Certificate of Status	
NEW FILINGS	<u>AMENDMENTS</u>
Profit Corp	Amendment
Not for Profit	Resignation of R.A.
Officer/Director	_ 0
Limited Liability	Change of Registered Agent
Domestication	Revocation of Dissolution
Other	Merger
_ CORP	_XConversion
LLLP	Amended and restated Articles Statement of Authority
OTHER FILINGS	
	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign filing
	Limited Partnership
Fictitious Name	Reinstatement
APOSTILLE	Other

FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

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Authorization Signature:	t: 120210000160 <u>155.00</u>
Cee and Fee, LLC	
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Certified Copy of ARTICLES	
X Certificate of Status	
NEW FILINGS	<u>AMENDMENTS</u>
Profit Corp Not for Profit Officer/Director Limited Liability Domestication Other CORP LLLP	AmendmentResignation of R.AChange of Registered AgentRevocation of DissolutionMergerXConversionAmended and restated ArticlesStatement of Authority
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign filingLimited Partnership
Fictitious Name	Reinstatement
APOSTILLE	Other

COVER LETTER

TO: New Filing Section
Division of Corporations
SUBJECT: <u>Cee And tee LLC</u> (Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Felicia Suggs-Lucas (Contact Person)
Cee and Fee LLC
10380 S.W. Village Center Dr. #369
10380 S.W. Village Center Dr. #369 (Address) Port St. Lucke, Florida 34987 (City. State and Zip Code)
<u>CeeandfeellCagmail</u> , Com E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Felicia Suggs-Lucas at (800) 945-2338 or (778) 971.05 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$150.00 Filing Fees and Certified Copy \$185.00 Filing Fees Certified Copy and Certificate of Status
Mailing Address: New Filing Section New Filing Section

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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 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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Cee And Fee L. L. C. (Enter Name of Other Business Entity)				
(Enter Name of Other Business Entity)				
2. The "Other Business Entity" is a				
First organized, formed or incorporated under the laws of				
on $\frac{9/35/17}{\text{(date of organization, formation or incorporation)}}$ (Enter state, or if a non-U.S. entity, the name of the country)				
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:				
Cee And Fee L.L.C., (Enter Name of Florida Limited Liability Company)				
4. If not effective on the date of filing, enter the effective date: August 10, 2023. (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 10th day of August	20 <u>23</u>
Signature of Authorized Representative of Limit	
Signature of Authorized Representative: Printed Name: C. OUNTORII C. Lucios	Title: Member
Signature(s) on behalf of Other Business Entity:	
Signature: Selector Supple Lucos Printed Name: Felivia Supple Lucos	
Signature: Court neil C. Lucas	
Printed Name: Court neir C Lucas	Title: Member
Signature:	
Signature:Printed Name:	
Signatura	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Printed Name.	_ Title
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of the Directors or Officers have not been selected, an Inc.	corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
 *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

A	R	TI	IC	L	E	Ī	-	N	a	m	e	:
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The name of the Limited Liability Company is:

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
10380 S.W. Village Center Dr. # 369	10380 S.W. Village Center Or
#369 Port St. Lucie, FL. 34987	# 369
PACT ST. LUCK, CC. STYS 1	Part St. Lucle, FL. 34797

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Name
10380 S.W. Village Center Dr. #369
Florida street address (P.O. Box NOT acceptable) Part St. Lucke, FL 34987

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: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager AMBR (Use attachment if necessary) **ARTICLE V:** Other provisions, if any. REQUIRED SIGNATURE: went ducasa 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. Ourtneli Lucas 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)