L24000187616

(Re	equestor's Name)		
(Address)			
(Ad	ldress)		
(Cit	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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02/13/24--01008--025 **150.00



T. MATTHEWS APR 26 2024



March 11, 2024

CATHERINE CURTIS-FOREMAN 7211 W. CYPRESSHEAD DR PARKLAND, FL 33067 US

SUBJECT: AKYROS, LLC Ref. Number: W24000039197

We have received your document for AKYROS, 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):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

Letter Number: 624A00005216

Tekayla T Matthews Regulatory Specialist II

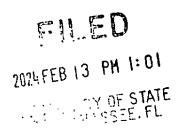
www.sunbiz.org

COVER LETTER

10:	New Filing So Division of C				
SURT	ECT: AKYROS	S, LLC			
3000	LC1	(Name of Res	ulting Florida Limi	ted Con	npany)
					d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please	e return all corre	espondence concernin	g this matter to:		
CATH	ERINE CURTIS	- FOREMAN			
		(Contact Person)	·	-	
FORE	MAN & COMPA	NY, INC.			
		(Firm/Company)		-	
7211 V	W CYPRESSHE	AD DR			
		(Address)		_	
PARK	LAND, FL 33067	,			
	((City, State and Zip Code)		-	
FORE	MANANDCO@C	GMAIL.COM			
E-r	nail Address: (to b	e used for future annual re	port notifications)	_	
For fu	rther informati	on concerning this ma	tter, please call:		
CATH	ERINE CURTIS	- FOREMAN	at (⁹⁵⁴	\478-5	5504
-	(Name of Conta	ict Person)	(Area Code) (Day	time Telephone Number)
		or the following amou a bank located in the		process	sed by this office must be payable in US
(\$25 fo & \$125	i0.00 Filing Fees or Conversion 5 for Articles anization)	S155.00 Filing Fees and Certificate of Status	S180.00 Filing and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New I Divisi The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company



The Articles of Conversion <u>and attached Articles of Organization</u> 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: AKYROS, INC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
02/20/2016
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: AKYROS, LLC
(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 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 2	day of JANUARY, 2024	20
-	Authorized Representative of L	
Signature of	Authorized Representative:	- W 04 24
Printed Name	HARRISON FOREMAN 7	Title: OWNER
Timed rante		
Signature(s)	on behalf of Other Business Entity	v: See below for required signature(s)
	2 /	· · · · · · · · · · · · · · · · · · ·
Signature:	HARRISON FOREMAN	
Printed Name	HARRISON FOREMAN	Title: PRESIDENT
Signature:		
Printed Name	::	Title:
Signature:		
Printed Name	ï	Title:
Signature		
Printed Name		Title:
Timed Tame		
Signature:		
Printed Name	21	Title:
Signature		
		Title:
Timed rain	· · · · · · · · · · · · · · · · · · ·	
If Florida Co		
	Chairman, Vice Chairman, Director,	
If Directors o	r Officers have not been selected, ar	n Incorporator must sign.
If Florida Go	eneral <u>Partnership</u> or Limited Lia	bility Partnershin:
	one General Partner.	<u> </u>
~		
	mited Partnership or Limited Lia	bility Limited Partnership:
Signatures of	ALL General Partners.	
All others:		
	an authorized person.	
Ç	•	
Fees:		
Artic	les of Conversion:	\$25.00
	for Florida Articles of Organization	•
	fied Copy:	\$30.00 (Optional)
	ficate of Status:	\$5.00 (Optional)
		• •

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	In: 1 Ma c
The name of the Limited Liability Company	Lot 4 ,
	SECRUTARY OF STATE
AKYROS, LLC	THE ANSSERTE
(Must contain the words "Limited Lia	bility Company. "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the	e principal office of the Limited Liability Company is:
Deinsing LOFFice Address	Mailing Address
Principal Office Address:	Mailing Address:
4884 LOWELL BLVD	4884 LOWELL BLVD
DENVER, CO 80221	DENVER, CO 80221
	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are:
CATHERINE CURTIS - FC	
Na	ame
7211 W CYPRESSHEAD I	DR
Florida street address (I	P.O. Box NOT acceptable)
PARKLAND	FL 33067
City	Zip
liability company at the place designate registered agent and agree to act in this cap statutes relating to the proper and comple	nd to accept service of process for the above stated limited d in this certificate. I hereby accept the appointment as pacity. I further agree to comply with the provisions of all ete performance of my duties, and I am familiar with and registered agent as provided for in Chapter 605, F.S

(CONTINUED)

Athuire (Mtiv. follman Registered Agent's Signature (REQUIRED)

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	HARRIOON FOREMAN
MGR	HARRISON FOREMAN
	4884 LOWELL BLVD
	DENVER, CO 80221
(Use attachment if necessary)	
•	
CLE V: Other provisions, if any.	
i	
REQUIRED SIGNATURE:	
May and a series of the series	⊅Å
TT 1/1	
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 the
any false information submitted in a document	ment to the Department of State constitutes a third degree felo
as provided for in s.817.155, F.S.	
HARRICON FOREMAN	
HARRISON FOREMAN	
1 y	ped or printed name of signee
	Filing Fees