L1700229296

	(Requestor's Name)	
	(Address)	-
	(Address)	
	(Address)	
-	(City/State/Zip/Phone #)	
PICK-UF	P WAIT	MAIL
	(Business Entity Name)	-
	(Document Number)	
	(Bocument Hamber)	
Certified Copies	Certificates of Status	
Special Instructions t	o Filing Officer:	
<u> </u>		

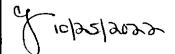
Office Use Only



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2022 OCT 24 MILL: 49





115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:1	0/24/2022	
Name:	Jennifer Bialowas	
Reference #:	1813300	_
	IMAN	YCO, INC.
☐ Articles	of Incorporation/Authorization	to Transact Business
Amendn	nent	
☐ Change	of Agent	
Reinstat	tement	
✓ Convers	sion	
Merger		
☐ Dissolut	ion/Withdrawal	
Fictitious	s Name	
✓ Other	Upon filing plea	se provide a certified copy
Authorized Am	ount: 55.00	
Signature:	C)	

COVER LETTER

TO: Registration Division of	Section Corporations		
SUBJECT:	lma	anyco, LLC	
	Name of Florida	Limited Liability Compa	ny
	es of Conversion and fo ompany" into an "Othe		
Please return all con	rrespondence concernin	g this matter to:	
	Saida A. Florexil		
	Contact Person		
	Imanyco, LLC		
	Firm/Company		
	5769 Coconut Blvd		
	Address		
West	Palm Beach, FL 334	11	
	City, State and Zip Code		
S	aida@imanyco.com		
	o be used for future annual r	report notification)	
For further informa	tion concerning this ma	tter, please call:	
Saida A. Florexil		at (561)	619-0425
Name of Contact	Person	— · · · \———/ —	ytime Telephone Number
Enclosed is a check	for the following amou	unt:	
☐ \$25.00 Filing Fee	☐ \$30.00 Filing Fee and Certificate of Status	□\$55.00 Filing Fee and Certified Copy	■ \$60.00 Filing Fee. Certified Copy, and Certificate of Status
Mailing Address: Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 322	ations	The Centre	Section Corporations of Tallahassee onroe Street, Suite 810

CR2E106 (05/17)

<u>Articles of Conversion</u>

For

2027.011.24 711.9:52

Florida Limited Liability Company Into

"Converted or Other Business Entity"

The Articles of Conversion is submitted to convert the following Florida Limited Liability Company into an "Other Business Entity" in accordance with s. 605.1045, Florida Statutes.

Imanyco, LLC
Enter Name of Florida Limited Liability Company
2. The name of the "Converted or Other Business Entity" is:
Imanyco, Inc.
Enter Name of "Converted or Other Business Entity"
3. The "Converted or Other Business Entity" is a
organized, formed or incorporated under the laws of
4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S.
4. The plan of conversion was approved by the converting Florida Limited Liability

- 6. If the "Converted or Other Business Entity" is an out-of-state entity not registered to transact business in Florida, the "Converted or Other Business Entity":
 - a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to 605.0117 and Chapter 48.

Street	Address:		5769 Coconut Biva				
			West Palm Beach, FL 33411				
Mailir	ng Address:		_	Same	as above		
app		or Other Busine he amount to wl					
Signed thisc		day c	_day ofOcto		tober	ber 20	
Signat	ture:	Must be s	igned by	a Member or Ai	ithorized Represei	ntative	
Printe	d Name:	Saida A. Flor	exil	Title:	Chief Exe	cutive Offic	cer ————
Fees:		py: f Status:)		