# 11800207312

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

Office Use Only

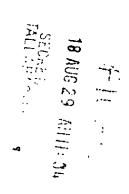
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W18-75590



#### **COVER LETTER**

Division of Co	orporations				
SUBJECT: <u>JUN</u>	nantha Kasp (Name of Res	Drzyk Beng ulting Florida Limited Con	e PUC		
			d fees are submitted to co ecordance with s. 605.104		"Other
Please return all corre	espondence concerning	g this matter to:			
Samanth		Senge ingc PUC		TALLAHATT	18 AUS 29 AH 11: 34
·	e used for future annual re	•			
For further information	on concerning this mat	tter, piease call:			
Name of Conta	Slige ct Person)	at ( 44 ( ) 6 (Day (Day	time Telephone Number)		
	or the following amou a bank located in the		sed by this office must be	payable i	in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
STREET ADDRESS New Filing Section Division of Corporati		MAILING A New Filing S Division of C	ection		

P. O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

TO: New Filing Section

### **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 second of the WOrk on Decision of English Discount Linear London and the Clima of the Angleton of Communication	
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	.)
First organized, formed or incorporated under the laws of	
First organized, formed or incorporated under the laws of	
on 127/14 (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  Summittee Kasprzyk Benge Puc  (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.	
18 AUS 2	· ·

Signed this 17th day of August 20 18.		
Signature of Authorized Representative of Limited Liability Company:		
Signature of Authorized Representative: MMWHA Knopph Buy Printed Name: Samuntha Kaspright - Title: President Beane	_	
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]		
Signature: Samantha Kaigrayk Title: President Signature: Benje	SLONE	18 AUG
Signature: Title:	7,5	29
Printed Name: Title:	0	
Signature:	•	聖子は
Signature:		
Signature: Printed Name:Title:		
Signature		
Signature: Title:		
Signature:		
Printed Name: Title:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.		
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.		
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.		
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 (0

Certified Copy: \$30.00 (Optional) Certificate of Status: \$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	
The name of the Limited Liability Company is:	
Samantha Kasprzyk Beng	e PLIC BE TO
(Must contain the words "Limited Liability Company," L	.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ca of the Limited Liability Company is:
The maning address and street address of the principal offi	ce of the Entitled Elability Company is.
Principal Office Address: Mailing	Address:
8317 Nandina D1 831	7 Nandina Di
Sarauota Pl 34240 San	115th 12 34240
	<u> </u>
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Registered Agent. You business entity with an active Florida registration.)	
The name and the Florida street address of the registered a	gent are:
	~
Katie McDonnei	<u> </u>
Name	
2102 Arlington	5+
Florida street address (P.O. Box NOT	acceptable)
Sanaide	311120
<u> DUMASOTA FL</u> City	7in
City	z.ip
Having been named as registered agent and to accept ser liability company at the place designated in this certific registered agent and agree to act in this capacity. I furthe statutes relating to the proper and complete performance accept the obligations of my position as registered age	cate, I hereby accept the appointment as or agree to comply with the provisions of all the of my duties, and I am familiar with and
Kahin	Dur
' Registered Agent's Signature (REC	JOIKED)

(CONTINUED)

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	<b>⊼</b> ∽
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<del></del>	<del> </del>
(Use attachment if necessary)	
CLE V: Other provisions, if any.	al Estate Sales
·	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	Em - Berr
Signature of a member or	anfauthorized representative of a member
Signature of a member or This document is executed in accordance	an/authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes, I am aware to the Department of State constitutes a third degree follower.
Signature of a member or This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes. I am aware t
Signature of a member or This document is executed in accordance any false information submitted in a docu	e with section 605.0203 (1) (b), Florida Statutes. I am aware t
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an/authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware to ment to the Department of State constitutes a third degree fel  Sprik - Belie  yped or printed name of signee  Filing Fees

\$ 5.00 Certificate of Status (Optional)

\$ 30.00 Certified Copy (Optional)

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

, ARTICLE IV-

Company: