L19006140131

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





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K. Brumbley

COVER LETTER

TO: New Filing S Division of O				
SUBJECT, HANNA	ARTS PHOTOGRAPHY.	LLC		
SOBRECT.	(Name of Res	sulting Florida Lim	ited Con	npany)
				d fees are submitted to convert an "Otle coordance with s. 605.1045, F.S.
Please return all cor	respondence concernin	g this matter to:		
Anthony Morales				
	(Contact Person)		_	
MyUSAcorporation.com	n			
	(Firm/Company)		_	
1 Radisson Plaza, Suite	800			
	(Address)		_	
New Rochelle, NY 108	01			
	City, State and Zip Code)		_	
info@myusacorporation	n.com			
E-mail Address: (to	be used for future annual re	port notifications)	_	
For further informat	ion concerning this ma	tter, please call:		
Anthony Morales		_at (330-2	2677
(Name of Cont	act Person)	(Area Code	(Day	2677 rtime Telephone Number)
	for the following amount a bank located in the		process	sed by this office must be payable in U
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	■\$180.00 Filin and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status

STREET ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

Articles of Conversion

For

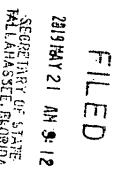
"Other Business Entity"

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: HANNA ARTS PHOTOGRAPHY, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company
(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)
11/16/2012
on 11/16/2012 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
HANNA ARTS PHOTOGRAPHY, 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



Signed this 12	2th day of March	20 19
Signature of	Authorized Representative of Li	mited Liability Company:
C: C.	Authorized Representative:	Felix Da
Signature of A	Authorized Representative:	m: L M 1
Printed Name:	LESLIE HANNA	little: Member
Signature(s) o	on behalf of Other Business Entity	: [See below for required signature(s)]
Signature:	Shid Aa	
Printed Name:	Leslie W HANNA	Title: Owen
Signature		
Printed Name:		Title:
r timed ramine.		THE.
Signature:		
Printed Name:		Title:
Signature:		T.1
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
If Florida Co	rnoration:	
	hairman, Vice Chairman, Director.	or Officer
If Directors or	Officers have not been selected, an	Incorporator must sign.
	·	. 3
	neral Partnership or Limited Liab	oility Partnership:
Signature of or	ne General Partner.	
If Florida Lin	nited Partnership or Limited Liab	ility Limited Partnership
	ALL General Partners.	mity Emilieu I al thei ship.
All others:		
Signature of a	n authorized person.	
Fees:		
Article	es of Conversion:	\$25.00
	or Florida Articles of Organization	
	led Copy:	\$30.00 (Optional)
	cate of Status:	\$5.00 (Optional)
	**	\ - \ - \

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company	, 10	
HANNA ARTS PHOTOGRAPHY, LLC		
(Must contain the words "Limited Lia	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
	e principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
534 WILD FORREST DRIVE	534 WILD FORREST DRIVE	
DAVENPORT, FL 33837	DAVENPORT, FL 33837	
business entity with an active Florida registration.)	tegistered Agent. You must designate an individual or another	
business entity with an active Florida registration.) The name and the Florida street address of the street a		
business entity with an active Florida registration.) The name and the Florida street address of t LESLIE HANNA	he registered agent are:	
business entity with an active Florida registration.) The name and the Florida street address of t LESLIE HANNA		
business entity with an active Florida registration.) The name and the Florida street address of t LESLIE HANNA N 534 WILD FORREST DRIV	he registered agent are: ame	
business entity with an active Florida registration.) The name and the Florida street address of t LESLIE HANNA N 534 WILD FORREST DRIV	he registered agent are:	
business entity with an active Florida registration.) The name and the Florida street address of t LESLIE HANNA N 534 WILD FORREST DRIV	he registered agent are: ame	
business entity with an active Florida registration.) The name and the Florida street address of the LESLIE HANNA N 534 WILD FORREST DRIVE Florida street address (1)	he registered agent are: ame /E P.O. Box NOT acceptable)	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	LESLIE HANNA
	534 WILD FORREST DRIVE
	DAVENPORT, FL 33837
	<u> </u>
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	\ <u>\</u>
Jests	760
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the nent to the Department of State constitutes a third degree felo
as provided for in diolivinos, case	
LESLIE HANNA	

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