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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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02/10/21--01028--020 **180.00

COVER LETTER

Division of Corporations SUBJECT. B-NYCE, LLC
B-NYCF LLC
SUBJECT:
(Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Oth Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
WILLIAM E. FITZSIMMONS, JR.
(Contact Person)
BNYCE, INC.
(Firm/Company)
281 W. CITRUS STREET
(Address)
ALTAMONTE SPRINGS, FL 32714
(City, State and Zip Code)
BNYCEME15@GMAIL.COM
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
SHIRLEY A. FITZSIMMONS at (786)390-2127
(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)
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) S150.00 Filing Fees and Certificate of Status S150.00 Filing Fees & \$185.00 Filing Fees & Certified Copy & Certified Copy & Certified Copy & Certificate of Status
STREET ADDRESS: New Filing Section MAILING ADDRESS: New Filing Section

Division of Corporations

Tallahassee, FL 32314

P. O. Box 6327

INHS11 (7/17)

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Conversion

For

"Other Business Entity"

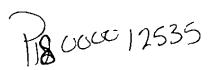
Into

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: B-NYCE, 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.)
FLORIDA First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
02/06/2018
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: B-NYCE, 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 5th day of FEBRUARY	
Signature of Authorized Representative of Li	mited Liability Company:
Signature of Authorized Representative:	STATITLE MGE
Signature(s) on behalf of Others Business Entity	: [See below for required signature(s)]
Signature: William of 1725 immons, 1	Trile: PRES
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
MET II C	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, o	or Officer.
If Directors or Officers have not been selected, an	
If Florida General Partnership or Limited Liab	sility Partnershin:
Signature of one General Partner.	mer tarmerany.
If Florida Limited Partnership or Limited Liab Signatures of <u>ALL</u> General Partners.	oility Limited Partnership:
All others:	
Signature of an authorized person	

Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00

Fees:

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
B-NYCE, LLC (Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
WILLIAM E. FITZSIMMONS. JR. 281 W CITRUS ST ALTAMONTE SPRINGS FL 32714	281 W. CITRUS STREET ALTAMONTE SPRINGS, FL 32714
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re-	egistered agent are:
WILLIAM E. FITZSIMMONS, J	R
Name	

281 W. CITRUS STREET
Florida street address (P.O. Box NOT acceptable)

ALTAMONTE SPRINGS FL 32714

City Zip

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:

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	WILLIAM E. FITZSIMMONS, JR.
	281 W. CITRUS STREET
	ALTAMONTE SPRINGS, FL 32714
	
(Use attachment if necessary)	
•	
LE V: Other provisions, if any.	
tele v. Other provisions, it may.	
· · · · · · · · · · · · · · · · · · ·	
REQUIRED SIGNATURE:	
in the said	,
William For	
Signature of a member of	an authorized representative of a member
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware t
 any false information submitted in a docur 	ment to the Department of State constitutes a third degree fel-
as provided for in s.817.155, F.S.	
WHILLIAM C PITTORAMANO O	
WILLIAM E. FITZSIMMONS, JR.	

Typed or printed name of signee

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)