# L21000/43416

(Re	questor's Name)	
(Ad	dress)	<u>-</u>
(Ad	dress)	
(Cit	ry/State/Zip/Phone #	)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	)
(Do	ocument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	-

Office Use Only



000353010430

10/02/20--01024--014 \*\*150.00

2021 APR - 5 AM 7: 23

Chy 21



October 22, 2020

MARY ELISABETH TAWES 2634 ROYAL PALM DR NORTH PORT, FL 34288

SUBJECT: MELODIC PIANOS LLC Ref. Number: W20000122415

We have received your document for MELODIC PIANOS LLC and your check(s) totaling \$150.00. However, the document has not been filed and is being retained in this office for the following:

The incorrect form was submitted to our office.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Jessica A Fason Regulatory Specialist II

> 2021 APR -5 AM 7: 23 NICHARASSEE FLORIDA

Letter Number: 520A00020970

## COVER LETTER

	ew Filing Sectivision of Co							
SUBJEC	T: Melo	dic Planos L (Name of Resu	LC lting Florida Limited	Company)				
Business Please re	Entity" into a	of Conversion, Article a "Florida Limited Lia spondence concerning	es of Organization, bility Company" i this matter to:	, and fees are submitte n accordance with s. 6	d to con 05.1045	vert an i, F.S.	ı "Oth	et
Mar	y Elisal	Contact Person)  SAUS LL (Firm/Company)						
Me.	odic Fi	(Firm/Company)			;	, <del>-</del>	20	
		(Address)			•	10 10 10 10 10 10 10 10 10 10 10 10 10 1	121 AFR	
	`-	FL 34288 fity, State and Zip Code)				(0) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	-6 <b>&gt;-</b>	[T:
Mらて E-mai	A いどら 〇 l Address: (to be	Yenso, Come used for future annual rep	oort notifications)			3187 5187 5187	AM 7: 23	C
For furtl	ner informatio	on concerning this mat	ter, please call:			77	ယ	
Mary	Elischet	n Tawls	at ( 753 ) (Area Code)	SOI - 4703 (Daytime Telephone Num	ber)			
Enclose dollars a	d is a check found drawn on	or the following amou a bank located in the	nt: (All checks pro United States)	ocessed by this office r	nust be	payabl	e in U	S
(\$25 for C	00 Filing Fees Conversion or Articles zation)	S155.00 Filing Fees and Certificate of Status	S180.00 Filing Fo and Certified Copy		1			
	Mailing Add New Filing So Division of C P.O. Box 632 Tallahassee, I	ection orporations 7	N D T 2	treet Address: New Filing Section Division of Corporation The Centre of Tallahass 415 N. Monroe Street. Callahassee, FL 32303	see	10		

# Articles of Conversion

For

#### "Other Business Entity"

Into

## Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes

itutes.
The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  Melodic Pianos LLC  (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
The "Other Business Entity" is a Linke Linblity Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
rst organized, formed or incorporated under the laws of Virginic  (Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or incorporation)
The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Melodic Pienes LLC (Enter Name of Florida Limited Liability Company)
If not effective on the date of filing, enter the effective date:  'he 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.)  Out: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the comment's effective date on the Department of State's records.
The plan of conversion has been approved in accordance with all applicable statutes.
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.
2021 APR

Signed this 26 day of October	20 <u>20</u> .		
Signature of Authorized Representative of Limit	ed Liability Company:		
Signature of Authorized Representative: M. E. Printed Name: May Edisabeth Towes	Title: Own	_	
Signature(s) on behalf of Other Business Entity: [5]	See below for required signature(s)	]	
Signature: M. E. Jan- Printed Name: Mary Elisabeth Tawes	Title: OUNC	<del></del>	
Signature:Printed Name:	Title:	<del>-</del> -	
Signature:Printed Name:	Title:	<del></del>	
Signature:Printed Name:	Title:		
Signature:Printed Name:	_ Title:	<u> </u>	
Signature:Printed Name:	Title:	<del></del>	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	Officer. corporator must sign.		
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:		
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:		
All others: Signature of an authorized person.		•	20
Fees:		¥ .	2021 APR
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	ASSECTIONING	R-6 AN 7:23

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company	is:	
Melodic Piane's LL.C. (Must contain the words "Limited Liab	oility Company, "L.L.C.," or "Ll.C.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limite	ed Liability Company is:
Principal Office Address:	Mailing Address:	
2634 Royal Palm DC North Port, FL 34253	2634 Royal F North Port, FL	21m Dr. 34288
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)	red Office, & Registered Agegistered Agent. You must designate an	gent's Signature: n individual or another
The name and the Florida street address of the	ne registered agent are:	
	Tawes	
2634 Koya   Porida street address (1	P.O. Box <u>NOT</u> acceptable)	
North Port	FL 34298 Zip	
Having been named as registered agent an liability company at the place designate registered agent and agree to act in this castatutes relating to the proper and comples accept the obligations of my position as	nd to accept service of process of in this certificate, I hereby a pacity. I further agree to com ete performance of my duties,	eccept the appointment as ply with the provisions of all and I am familiar with and
Registered Agent's	Signature (REQUIRED)	- •
(CON	ΓINUED)	2021 APR -6
		AR 7:2

The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager AMBR\_ (Use attachment if necessary) ARTICLE V: Other provisions, if any. REQUIRED SIGNATURE: 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 that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.\$17.155, F.S.

ARTICLE IV-

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

Typed or printed name of signee