# L21000154727

(Re	equestor's Name)	
(Address)		
(Ad	idress)	
(Ĉi	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	<u></u>	

Office Use Only



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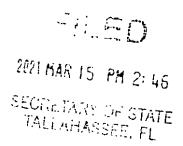
## **COVER LETTER**

TO: New Filing S Division of C				
SUBJECT: Innovativ	e IV, LLC			
SUBJECT:	(Name of Res	ulting Florida Li	mited Cor	mpany)
		_		nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to	o:	
Leslie Leon				
	(Contact Person)			
Innovative IV, LLC				
	(Firm/Company)			
7905 SE Paurotis Land	e			
	(Address)		<del></del>	
Hobe Sound, FL 3345	55			
	City, State and Zip Code)			
leslieleon@innovativei	v.com			
E-mail Address: (to b	e used for future annual re	port notifications	)	
For further informati	on concerning this ma	tter, please cal	1:	
Leslie Leon		•		4828
(Name of Conta	ot Porcon)	_at ( <u>860</u>	<u>)478-</u>	vtime Telephone Number)
(Name of Conta	ect reisony	(Mea Co	(1311)	verme receptione realities;
	or the following amou a bank located in the	· ·	-	sed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Fili and Certified C	-	■\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add	ress:		Stree	t Address:
New Filing Section			New Filing Section	
Division of Corporations			Division of Corporations	
P.O. Box 632	1		ine (	Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



## 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

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Innovative IV, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (Limited Liability Company)  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
(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)
May 6, 2005
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  Innovative IV. LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 3/17/2021
(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 <u>12</u>	_ day of March 2021	20
		rized Representative of Lim	
Signatu	re of Authori:	zed Representative:	1 la
Printed	Name: Leslie L	.eon	Title: Managing Member
Signatu	ire(s) on beha	If of Other Business Entity:	[See below for required signature(s)]
Signatu	re	(O) ( )	Teca
Printed	Name: Leslie L	.eon	Title: Managing Member
	<u> </u>		
Signatu	re:		
Printed	Name:		Title:
Cinnatu			Title:
Printed	ic Name:		Title:
Timea	rvane		
Signatu	re:		
Printed	Name:		Title:
Signatu	re:		Title:
rimea	Nautic.		
Signatu	re:		
Printed	Name:		Title:
	da Corporati		08
		n, Vice Chairman, Director, or is have not been selected, an In	
11 151166	tors or Officer	s have not been selected, an in	corporator must sign.
<u>If Flori</u>	da General P	artnership or Limited Liabil	ity Partnership:
	re of one Gene		
		artnership or Limited Liabili	ity Limited Partnership:
Signatu	res of ALL Go	eneral Partners.	
All other	ers:		
	re of an authoi	rized person.	
		•	
Fees:			
	1-intra-00		\$25.00
	Articles of Co	onversion: da Articles of Organization;	\$25.00 \$125.00
	Certified Cop	~	\$30.00 (Optional)
	Certificate of	•	\$5.00 (Optional)

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Na	ame:		
<del>-</del>	Limited Liability Compan	y is:	
Innovative IV, LLC			
(N	fust contain the words "Limited I.	iability Company, "L.L.C.," or "L.L.C.")	
ARTICLE II - A	ddress:		
=		he principal office of the Limited Lia	ability Company is:
<b>-</b>		•	, , ,
Principal Office	Address:	Mailing Address:	
Innovative IV, LLC		Innovative IV, LLC	
7905 SE Paurotis L	ane	7905 SE Paurotis Lane	
Hobe Sound, FL 3	3455	Hobe Sound, FL 33455	
(The Limited Liability (		lered Office, & Registered Agent's Registered Agent. You must designate an individ	
The name and the	Florida street address of	the registered agent are:	Λ κa m
	Leslie Leon	·····	2021 MAR SECRETA TALLA
	1	Name	TANK IS
	7905 SE Paurotis Lane		E
	Florida street address	(P.O. Box <u>NOT</u> acceptable)	10 A
	Hobe Sound	FL <sup>33455</sup>	2: 46 STAT E, FL
	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-

as provided for in s.817-155, F.S.

Leslie Leon

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
Managing Member	Leslie Leon
<del></del>	7905 SE Paurotis Lane
	Hobe Sound, FL 33455
***************************************	
	(a) (b)
	<del></del>
	SECNETAL LAHA
	<u> </u>
(Use attachment if necessary)	
	ŗū
TICLE V: Other provisions, if any.	
<u>required</u> .signature!	
Signature of a mombar on	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 docu-	ment to the Department of State constitutes a third degree felony

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)