L2100036527

(Requestor's Name)		
(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:		
W21000073738		

Office Use Only



800363600818

04/14/21--01018--013 **185.00

June 1 2021

SECRETALL OF STATE

COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT:	arnina.	WOrks LL sulting Florida Limite	LC	
	(Name of Res	sulting Florida Limite	(ted Company)	
The enclosed Article Business Entity" into	s of Conversion, Artic o a "Florida Limited Li	les of Organizatic iability Company	ion, and fees are submitted to convert a y" in accordance with s. 605,1045, F.S	m "Other
Please return all corr	respondence concernin	g this matter to:		
Micha	el ARNING (Contact Person)	· -)		
	(Contact Person)		-	
arning	Firm/Company)			
	(Firm/Company)		-	
14751	Kingfisher L	$-\infty\rho$		
	(Address)	· **	_	
Nope	17L 3410	20		
	City, State and Zip Code)		_	
mbarr	ing g me. Coin			
E-mail Address: (to b	oe used for future annual re	port notifications)		
For further informati	ion concerning this ma	tter, please call:		
Michael	ARNING	at GIU	818Y YO'S 1	
(Name of Cont		(Area Code)	(Daytime Telephone Number)	
	for the following amou a bank located in the		processed by this office must be payab	le 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 and Certified Copy	-	
Mailing Add	lress:		Street Address:	
New Filing S	Section		New Filing Section	
Division of C P.O. Box 631	•		Division of Corporations The Centre of Tallahassee	
1 AU. DON 0.5.	<u>- 1</u>		THE CERTICAL PROPERTY.	

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 <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:
(Enter Name of Other Business Entity)
(Enter Same of Other Business Entity)
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
on Oct 31, 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: Others, works 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 27th day of May	20_7 /	
Signature of Authorized Representative of Limited Liability Company:		
Signature of Authorized Representative: ellos Printed Name: 17104NEL ARMING	•	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]	
Signature: Elisare eximg Printed Name: MICHREL ARRIVE	Title: OWNER	
Signature:		
Signature: Printed Name:	Title:	
Signature:Printed Name:		
Printed Name:	Tute:	
Signature: Printed Name:		
Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:	Tide	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In If Florida General Partnership or Limited Liabili	Officer. corporator must sign.	
Signature of one General Partner.		
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:	
All others: Signature of an authorized person.		
<u>Fees:</u>		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

2021 JUH -1 PH 3: 26

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must contain the words "Limited Liability Company, "L.L.C.," or "L.L.C.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	<u>Mailing Address:</u>
14751 Kingfisher Loop	1475 1 King fish 1 Loop
Naples, FL 34120	Maples FL 341.20

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Michael A	ning
Na	ne
14751 King	Loop Loop
Florida street address (P.O. Box <u>NOT</u> acceptable)	
Naples	FL 34120
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)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
MGR" = Manager <u>Firisa + DS&</u>	Michael Arning		
	SECTION -		
(Use attachment if necessary)			
ARTICLE V: Other provisions, if any,	STATE		
REQUIRED SIGNATURE:			
Mikal chair	if		
This document is executed in accordance	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, I am aware that ment to the Department of State constitutes a third degree felony		
7. chaé Ari	ped or printed name of signee		
Туј	ped 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)