343516

(Re	questor's Name)	
(Ada	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
<u></u>	WAIT	MAIL
(Bu:	siness Entity Nan	me)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



400363527444

05/10/21--01002--015 **185.00

COVER LETTER

Division of Co	orporations				
SUBJECT: L&P Man	agement LLC				
30bJEC1	(Name of Res	ulting Florida Li	mited Com	npany)	
The enclosed Articles Business Entity" into	s of Conversion, Articl a "Florida Limited Li	es of Organiz ability Compa	ation, and any" in ac	d fees are submitted to convert an "Oth coordance with s. 605.1045, F.S.	er
Please return all corre	espondence concerning	g this matter to	o:		
Stephanie Dickerson					
	(Contact Person)				
L&P Corporation Intern	ational				
<u> </u>	(Firm/Company)				
174 Watercolor Way, S	STE 103, #170				
	(Address)				
Santa Rosa Beach, FL	32459				
((City, State and Zip Code)				
stephdickerson101@g	mail.com				
E-mail Address: (to b	e used for future annual re	port notification	s)		
For further information	on concerning this ma	tter, please ca	ll:		
Stephanie Dickerson		at (404	606-5	5143	
(Name of Conta	ct Person)		ode) (Day	ytime Telephone Number)	
	or the following amou a bank located in the			sed by this office must be payable in U	S
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Fill and Certified		■\$185,00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Add	ress:		Stree	et Address:	
New Filing S	ection		New	Filing Section	
Division of C				sion of Corporations	
P.O. Box 632	. /		The (Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

TO: New Filing Section



June 4, 2021

STEPHANIE DICKERSON 174 WATERCOLOR WAY STE 103 #170 SANTA ROSA BEACH, FL 32459

SUBJECT: L&P MANAGEMENT LLC

Ref. Number: W21000081162

We have received your document for L&P MANAGEMENT LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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

Letter Number: 921A00012206

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: L&P Corporation International
(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.)
(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)
1/21/2021
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
L&P Management International 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 day of	_ 20
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Printed Name: Stephanie Dickerson	Title: Chairman
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Transport	
Printed Name: Stephanie Dickerson	Title: General Partner
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
Signature: Printed Name:	Title
	1 tuc.
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	OSE
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
ISPLANT TO A T	
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
·	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)
	(- p)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - The name of the	Name: ne Limited Liability Company	y is:	
L&P Manageme	ent International LLC		
	(Must contain the words "Limited Li	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II The mailing ad		e principal office of the Limited Liability Com	pany is:
Principal Offi	ce Address:	Mailing Address:	
174 Watercolor	Way STE #103-170	174 Watercolor Way STE #103-170	
Santa Rosa Bea	ach, FL 32459	Santa Rosa Beach, FL32459	
ARTICLE III	- Registered Agent Pogist		
(The Limited Liabi) business entity wit	- Registered Agent, Register lity Company cannot serve as its own R h an active Florida registration.) the Florida street address of the company cannot serve a serve and the florida street address of the florida str	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another	:
(The Limited Liabi) business entity wit	ity Company cannot serve as its own R h an active Florida registration.)	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another	:
(The Limited Liabi) business entity wit	ity Company cannot serve as its own R th an active Florida registration.) the Florida street address of the Stephanie Dickerson	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another	:
(The Limited Liabi) business entity wit	ity Company cannot serve as its own R th an active Florida registration.) the Florida street address of the Stephanie Dickerson	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are:	:
(The Limited Liabi) business entity wit	the Florida street address of the Stephanie Dickerson No. 102 Wayne Trail	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are:	:
(The Limited Liabi) business entity wit	the Florida street address of the Stephanie Dickerson No. 102 Wayne Trail	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are:	:

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:

"MGR" = Manager	_	
MGR	Stephanie Dickerson	
	102 Wayne Trail	
	Santa Rosa Beach, FL 32459	
		
		~
		2021 JUL 21
		<u></u>
(III and the state of the state		L_
(Use attachment if necessary)		12
		114
CLE V: Other provisions, if any.		=
usiness As 'L&P Management Intl'		S
		6

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.817.155, F.S.

Stephanie Dickerson

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)