L21000378933

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

Office Use Only

V121009/13

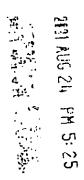
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June 24, 2021

CODEY SEMDER 2800 N 6TH STREET #5063 ST. AUGUSTINE, FL 32084

SUBJECT: MODERN HOME EDGE LLC

Ref. Number: W21000091803

We have received your document for MODERN HOME EDGE LLC and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

LLC can only convert to FLORIDA.

Please return the corrected original and one copy of 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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 921A00014418

COVER LETTER

TO: New Filing Section
Division of Corporations
SUBJECT: Edge Enterprises LLC
(Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Cooley Sender
Edge Enterprises LLC
Edge Enterprises LLC 213 Windsong Acres Rd.
St. Augustine, FL 32086 (City, State and Zip Code)
CSETICIET 62 TE GHATTICOM
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
CODEY SEMCIET BI (904) 257-3302 (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)
(\$25 for Conversion & Status Status
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Street Address: New Filing Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Artistics of Conversion For Other Business Entity Into

Florida Limited Liability Company

The Arrester 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 8,605,1045, Florida Statutes.

Statutes.	
1 The name of the "Other Business Entity" immediately prior to the filing	g of the Articles of Conversion is.
(Finner Name of Other Husiness Entity)	
2 The "Other Business Entity" is a	vocable remove law or human rest etc.
First organized, formed or incorporated under the laws of New (finter state, or if a no	Dersey
on August 28, 2020. (date of organization, formation or incorporation)	,
3 The name of the Florida Limited Liability Company as set forth in the EOSE ENTERISES LL	
(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 not	r more than 90 calendar days after
the date this document is filed by the Florida Department of State.) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requidincument's effective date on the Department of State's records.	rements, this date will not be fisted as the
5 The plan of conversion has been approved in accordance with all applic	able statutes.
6 The "Converted or Other Business Entity" has agreed to pay any members which such members are entitled under ss. 605,1006 and 605,1061-605,10	
	&# 2F</td></tr></tbody></table>

Signed this 1st day of August	20 21
Signature of Authorized Representative of Limits	rd Liability Company:
Signature of Authorized Representative: Printed Name: COS SEMORE	Title: Owner / Incorporator
Signature(s) on behalf of Orber Rusiness Entire	below for required signature(s)]
Signature: Printed Name: Code Good 61	Title: CHANGI/INCORPORATOR
Signature:	·
Printed Name:	Title:
Signature	•
Signature: Printed Name:	Title:
Signature:	
Printed Name:	_ Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	_ Title:
44 Ph. 14 C	,
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or C)
If Directors or Officers have not been selected, an Inc	
The second of th	orporator mast sign.
If Florida General Partnership or Limited Liability Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
	• F: 7 11/

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

Mailing Address:

ARTICLE 1 - Name:

ARTICLE II - Address:

Principal Office Address:

The name of the Limited Liability Company is:

(The Limited Liability Company cannot serve as its own Registered Agent, You must designate an individual business entity with an active Florida registration.)	l ar moth er
The name and the Florida street address of the registered agent are:	
2800 N. 6th St. #5063	•
Florida street address (P.O. Box NOT acceptable)	
St. Augustine FL 32084 City Zip	
City Zip	•
Having been named as registered agent and to accept service of process for the a liability company at the place designated in this certificate, I hereby accept the registered agent and agree to act in this capacity. I further agree to comply with a statutes relating to the proper and complete performance of my duties, and I am accept the obligations of my position as registered agent as provided for in Ch	e appointment as the provisions of all familiar with and
Registered Agent's Signature (REQUIRED)	2621
(CONTINUED)	221 AUG 24 PK 5

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Codey Souder-
	St. Augustine, FL 3308
	
(Use attachment if necessary)	,
,	
,	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE Signature of a member or This document is executed in accordance uny false information submitted in a docu	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
Signature of a member or This document is executed in accordance any false information submitted in a document provided for in s.817.135, F.S.	with section 605,0203 (1) (b). Florida Statutes, Lum aware that