17/000436619

(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:
[W210000778]

Office Use Only



700362877567

10/04/21--01007--002 **21.25

04/06/21--01005--014 **128.75

TELEMENT OF EL EL 2:43

COVER LETTER

TO: New Filing S Division of C					
SUBJECT: Elite536	LLC				
		sulting Florida Lin	nited Co	mpany)	
The enclosed Article Business Entity" into	es of Conversion, Artic o a "Florida Limited L	les of Organiza iability Compar	tion, ai iy'' in a	nd fees are submitted to accordance with s. 605.	convert an "Other 1045, F.S.
Please return all corr	espondence concernin	g this matter to:	<u>.</u>		
Robert W. Lively II					2
	(Contact Person)		_		181°
Elite 536 LLC					SEP
	(Firm/Company)		_		21 [88]
5753 Hwy 85N #5206					PI PI
	(Address)	-	_		72
Crestview, FL 32536					2021 SEP 27 PH 2: 43
(City, State and Zip Code)	-			<u> </u>
robkathy.kl@gmail.co.	m				
E-mail Address: (to b	oe used for future annual re	port notifications)	_		
For further informati	on concerning this ma	tter, please call:			
Cathy Strobeck	•	at (⁶⁷⁸		0975	
(Name of Conta	act Person)		:) (Day	ytime Telephone Number)	_
Enclosed is a check (dollars and drawn on	for the following amount a bank located in the	nt: (All checks United States)	proces	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 Filing and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Add New Filing S Division of C	ection orporations		New	t Address: Filing Section ion of Corporations	
P.O. Box 632			The C	Centre of Tallahassee	210
Tallahassee, I	L 32314		2415	N. Monroe Street, Suite	e 810

Tallahassee, FL 32303

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: Elite536 LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a fimited liability 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)
06/16/2020 on .
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Elite536 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 23 day of September	20
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative:	Ti Alambas
Signature of Authorized Representative: Printed Name: Robert W Lively II	little: Member
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Robert W Lively II Signature: Kathy C Signature:	Lively 33
Signature:	Tist. Member
Printed Name: Robert W Lively II	- Title: Wichiber
η aing c	. Sweig
Signature:	Tid., Manager
Printed Name: Kauly Lively	Title: wanager
Simutura	
Signature:Printed Name:	Title
Printed Name:	rmc.
Signature	
Signature:Printed Name:	Title
Timed Name.	
Signature:	
Printed Name:	Title:
Timed (Mile)	
Signature:	
Signature:Printed Name:	Title:
	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabil	ity Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabil	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
D.	
Fees:	
	635.00
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liabilit	v Company is:			
The hame of the Elimited Elabilit	y Company is.			
Elite536 LLC				
(Must contain the word	ds "Limited Liability	Company, "L.L.C	"" or "LLC.")	
ARTICLE II - Address:				
The mailing address and street ac	ddress of the pri	ncipal office of	of the Limite	d Liability Company is:
Principal Office Address:		Mailing Ad	dress:	
5753 Hwy 85N #5206		5753 Hwy 85	N #5206	
Crestview, FL 32536		Crestview, Fl	32536	
ARTICLE III - Registered Age (The Limited Liability Company cannot ser- business entity with an active Florida regis	ve as its own Registe	Office, & Regered Agent, You m	gistered Ago ust designate an	ent's Signature: individual or another
The name and the Florida street a	address of the re	egistered agen	t are:	
Robert W Live	ely II			
	Name			
5753 Hsy 85N	l #5206			
Florida stree	et address (P.O.	Box NOT acc	ceptable)	
Crestview		FL ³²⁵³⁶		
	City	7	Zip	
	e designated in cet in this capacite and complete per position as regional Relation.	this certificate ty. I further ag erformance of istered agent a Lively A	, I hereby acc gree to compo my duties, an as provided fo	cept the appointment as ly with the provisions of all nd I am familiar with and or in Chapter 605, F.S
Registere	ed Agent's Signa (CONTINU		RED)	2021 SEP 27 PM

ARTICLE IV-

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		
AMBR	Robert W. Lively II	
	5753 Hwy 85N #5206	
	Crestview, FL 32536	
MGR	Kathy Lively	
	5753 Hwy 85N #5206	 -
	Crestview, FL 32536	
	-	
		·-··
		_
		<u> </u>
		SS
(Use attachment if necessary)		SE
(Ose attachment it necessary)		
		<u> </u>
CLE V: Other provisions, if any.		HASSEE TLUMIDA
provincial, v. any.		200
REQUIRED SIGNATURE:		
my omm om.		
		 -

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. Robert W. Lively II

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)