121000474430

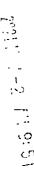
(Requestor's Name)				
(Address)				
(Address)				
(C	ity/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

Office Use Only



900375886489

11/02/21--01030--023 **180.00



COVER LETTER

d Company)
on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
330-26-77
(Daytime Telephone Number)
rocessed by this office must be payable in US Fees S185.00 Filing Fees,
Certified Copy, and Certificate of Status
Street Address:
New Filing Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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 Article LOOSE SEAL DEVELOPMENT LLC	es of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a LLC	
(Enter entity type. Example: corporation, limited partnership, general partnership, common	n 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)
04/08/2014 on .	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Artic	cles of Organization:
LOOSE SEAL DEVELOPMENT 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 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 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.	
 The "Converted or Other Business Entity" has agreed to pay any members having appraisa which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. 	72177-2-178
	Ϋ́O

Signed this 22nd day of October	20_21
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative:	me Houst
Signature of Authorized Representative: Printed Name: JULI HAUPT	Title: MEMBER
Signature(s) on behalf of Other Business Entity:	
· · · · · · · · · · · · · · · · · · ·	•
Signature: Juli Alupt Printed Name OULI HAUPT	Title: MEMBER
Printed Namesout Fixor 1	Title. McMocri
Signature:	
Signature: Printed Name:	Title:
Signature: Printed Name:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Timed Fune.	
Signature:	
Printed Name:	Title:
Signature:	Title
Printed Name:	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership
Signatures of <u>ALL</u> General Partners.	ty Emitted Farthership.
originatives of <u>1400</u> Octional Fundices.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00 \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
Celtificate of Status.	(- prizing)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		VELOPMENT LLC
(Must co	intain the words "Limited L	ability Company, "L.I.,C.," or "LI.C.")
ARTICLE II - Addre	ess:	
The mailing address ar	nd street address of the	ne principal office of the Limited Liability Company is
Principal Office Address:		Mailing Address:
8725 CRESCENDO AVI	ENUE	8725 CRESCENDO AVENUE
WINDERMERE, FL 34786		0.44 0.44 0.44 0.44 0.44 0.44 0.44 0.44
ARTICLE III - Regis	itered Agent, Regist	windermere, FL 34786 ered Office, & Registered Agent's Signature:
ARTICLE III - Regis (The Limited Liability Compa business entity with an active	itered Agent, Regist any cannot serve as its own e Florida registration.)	WINDERMERE, FL 34786
ARTICLE III - Regis (The Limited Liability Compa business entity with an active	stered Agent, Regist iny cannot serve us its own e Florida registration.) ida street address of	windermere, FL 34786 ered Office, & Registered Agent's Signature: Registered Agent, You must designate an individual or another
ARTICLE III - Regis (The Limited Liability Compa business entity with an active	stered Agent, Regist my cannot serve as its own e Florida registration.) rida street address of JUL	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
ARTICLE III - Regis (The Limited Liability Compa- business entity with an active The name and the Flor	stered Agent, Regist my cannot serve as its own e Florida registration.) rida street address of JUL	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are: HAUPT
ARTICLE III - Regis (The Limited Liability Compa- business entity with an active The name and the Flor	stered Agent, Regist any cannot serve as its own a Florida registration.) rida street address of JUL N	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are: HAUPT
ARTICLE III - Regis (The Limited Liability Compa- business entity with an active The name and the Flor	stered Agent, Regist any cannot serve as its own a Florida registration.) rida street address of JUL N	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are: HAUPT Jame NUE

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:

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	UBLANA
AMBR	JULI HAUPT
	8725 CRESCENDO AVENUE
	WINDERMERE, FL 34786
AMBR	JAMES HAUPT II
	8725 CRESCENDO AVENUE
	WINDERMERE, FL 34786
AMBR	BLAKE HAUPT
	8725 CRESCENDO AVENUE
	WINDERMERE, FL 34786
	27
	
	
(Use attachment if necessary)	
(Ose attachment it necessary)	9
LE V: Other provisions, if any.	
DEALIDED CLONATUDE.	
REQUIRED SIGNATURE:	
and:	Sauget
- July c	- Jurger
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
	JULI HAUPT
Tv	ped or printed name of signce

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)