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

Office Use Only



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DEC 0 2 2021

COVER LETTER

TO: New Filing S Division of O			
Division of	Corporations	a ()	
SUBJECT:	1976	S (om	any
	(Name of Res	sulting Florida Limited	Company)
		-	, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S.
Please return all cor	respondence concerning	g this matter to:	
Tyshera	(Contact Person)		
14+6	(Firm/Company)		
1037 P	nder St (Address)		
Deltana	City. State and Zip Code)	<u> </u>	
tutesco	6 qual com be used for future annual re		
For further informat	ion concerning this ma	tter, please call:	
(Name of Cont	ra Buller act Person)	at (<u>7 S</u>)_ (Area Code)	S69-ZOSS Daytime Telephone Number)
	for the following amound a bank located in the		cessed 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	S180.00 Filing Fe and Certified Copy	es
Mailing Add			reet Address:
New Filing S Division of C			ew Filing Section vision of Corporations
DITISION OF	or porations	D	vision of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

INHS11 (7/17)

P.O. Box 6327

Tallahassee, FL 32314

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

1. The name of the Other Business Entity immediately prior to the thing of the Articles of Conversion is:
14 + Company (Enter Name 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 Pennscilvania (Enter state, or if a non-U.S.) entity, the name of the country)
on March 27, 2019 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
(Enter Name of Florida Limited Liability Company)
(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 18th day of November	20_21
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative: Printed Name: Tashera Tscrife	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Cathera Duffer Printed Name: 738hera Suffer	Title:CEO
Signature:	
Printed Name:	Title:
a.	
Signature:Printed Name:	7*41
Printed Name:	1 itle:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	T'A
Printed Name:	little:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or all Directors or Officers have not been selected, an Inc. If Florida General Partnership or Limited Liability Signature of one General Partner. If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:	corporator must sign. ty Partnership:
	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
(1) (1) (7)	#30.00.70 (* 1)

Certified Copy: Certificate of Status: \$30.00 (Optional) \$5.00 (Optional)

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	y Company, "L.I.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1057 Pinder St Deltona, FL 37.775	1037 Proder St Deltona, FL 3272S
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	tered Agent. You must designate an individual or another
The name and the Florida street address of the r	registered agent are:
14Shera Name	Buller
1037 Pinder Florida street address (P.O.)	
Deltona City	FL 37725 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)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u>	Name and Address:
" Λ MBR" = Λ uthorized Member	
"MGR" = Manager	
-AMBL	Tyshera Butter
	1037 Prader St
	Dettona FC 32725
	
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary) ICLE V: Other provisions, if any.	
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REQUIRED SIGNATURE: Signature of a member or a	in authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance of	nn authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, 1 am aware tha
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance any false information submitted in a document in a doc	nn authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, 1 am aware tha
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that to the Department of State constitutes a third degree felor
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that to the Department of State constitutes a third degree felor
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)