L22000020454

(Red	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



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SECRETARY OF STATERETARY OF STATE

FILED FILED

9/23 to 9/24/21
9/23 AR D. O'KEEFE
JAN 20 2022

W21-97942



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 8, 2021

VJOSA BYTYQI COREALM LLC 2605 ENTERPRISE RD E STE 150 CLEARWATER, FL 33759

SUBJECT: COREALM LLC Ref. Number: W21000097942

We have received your document for COREALM LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please complete the marked sections in the Articles of Conversion. A signature is missing.

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.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 521A00015634

SECRETARY OF STATE

COVER LETTER

	New Filing S Division of C				
SUBJE	CT: _CORE	EALM LLC			
SCBUE.	C		sulting Florida Limi	ted Con	npany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please re	eturn all corr	espondence concernin	g this matter to:		
		Vjosa Bytyqi			
	٠.	(Contact Person)		-	
		COREALM LLC			
_		(Firm/Company)		-	
	260	5 Enterprise Rd E Suite 15	0		
		(Address)		-	
		Clearwater, FL 33759			
	((City, State and Zip Code)		-	
	VJOSA.E	BYTYQI@COREALM.CO	ЭМ		
E-mail	Address: (to b	e used for future annual re	port notifications)	-	
For furth	ner informati	on concerning this ma	tter, please call:		
	Labinot By	_	at (909) 275-	-9196
(Name of Conta	ct Person)	(Area Code)	(Day	rtime Telephone Number)
		or the following amou a bank located in the	·	rocess	sed by this office must be payable in US
S \$150.0 (\$25 for C & \$125 fo of Organiz	r Articles	S155.00 Filing Fees and Certificate of Status	S180.00 Filing and Certified Cop		☐S185.00 Filing Fees, Certified Copy, and Certificate of Status
	lailing Add				t Address:
	New Filing S				Filing Section
	Division of C	•			ion of Corporations Centre of Tallahassee
	P.O. Box 632 Pallahassee, I				N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Conversion

For

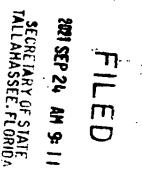
"Other Business Entity"

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: COREALM LLC
	(Enter Name of Other Business Entity)
2.	The "Other Business Entity" is aForeign Limited Liability Company
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
Fi	st organized, formed or incorporated under the laws of California
	(Enter state, or if a non-U.S. entity, the name of the country)
on	08-27-2012
	(date of organization, formation or incorporation)
3.	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
	COREALM LLC
_	(Enter Name of Florida Limited Liability Company)
4.	If not effective on the date of filing, enter the effective date:
(T the	he effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after each date this document is filed by the Florida Department of State.)
No doc	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nument'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 6 day of 21 20 21
Signature of Authorized Representative of Limited Liability Company:
Signature of Authorized Representative: 204491 Printed Name: Labinot Bytygi Title: CEO
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature: Labinet Brygix Title: CEO
Signature: Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.
All others: Signature of an authorized person.
<u>Fees:</u>

\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Articles of Conversion:

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: FILED

MISEP 24 AM 9: 1

SECRETARY OF STATE
ALLAMASSEE, FLORID

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of	the Limited Liability Company is:	
	COREALM LLC	
	(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	

ARTICLE II - Address:

Principal Office Address:

ARTICLE 1 - Name:

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

Mailing Address:

	
2605 Enterprise Rd E	2605 Enterprise Rd E
Suite 150	Suite 150
Clearwater, FL 33759	Clearwater, FL 33759

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Labino	ot Bytyqi
N	ame
2605 Enterpris	se Rd E Suite 150
Florida street address (l	P.O. Box NOT acceptable)
Clearwater	FL 33759
City	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)

FILED

SECRETARY OF STATE

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

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:			
"MGR" = Manager MGR	Vjosa Bytyqi			
	3639 Arboreturn Pl			
	Palm Harbor, FL 34683			
AMBR	Labinot Bytyqi			
	3639 Arboreturn Pl			
	Palm Harbor, FL 34683			
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(Use attachment if necessary)		FEC.	435 lag	- ';
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ARTICLE V: Other provisions, if any.		¥SS ASS	24	
TRITEBL V. Other provisions, if any.		Ϋ́C.		
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-		<u> </u>	=	- ·
REQUIRED SIGNATURE:		•		
1 6 1				

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.

Labinot Bytygi
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)