# 12200025739

(Rec	questor's Name)	
(Add	lress)	
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(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
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	Office Use Onl	V



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### COVER LETTER -

		COVEREDITE		
TO: New Filing So Division of Co	orporations			
SUBJECT:	Bell 8	ulting Florida Limited Co	Stur LLC	
	(Name of Res	ulting Florida Limited Co	mpany)	
			nd fees are submitted to convaccordance with s. 605.1045,	
Please return all corre	espondence concernin	g this matter to:		
Thu	resa Catall			
Bell &	resa Cabell  (Contact Person)  Les Gueral St  (Firm/Company)	we LLO		
5045	(Firm/Company)  Midnight Pass  (Address)	N		
Siest	(Address)  a Key FL  (ity. State and Zip Code)	BAZAZ		
corbell	theresa Gyah.	o. com		
E-mail Address: (to be	e used for future annual re	port notifications)		
For further information	on concerning this ma	tter, please call:		
Theresa Ca	bell	_at (917)4	302 2558	
(Name of Conta	ct Person)	(Area Code) (Da	ytime Telephone Number)	
	or the following amou a bank located in the	,	ssed by this office must be pa	iyable 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 Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
<u>Mailing Adda</u> New Filing Se			et Address: Filing Section	

Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327



January 3, 2022

THERESA CORBELL Corbett

5045 MIDNIGHT PASS RD
SIESTA KEY, FL 34242

Corbett

Slast name incorrectly spelled

We have received your document for BELL & ROO GENERAL STORE LLC and your check(s) totaling \$180.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Certificate of Conversion must be signed by an authorized person.

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.

Jessica A Fason Regulatory Specialist II

Letter Number: 722A00000026

# **Articles of Conversion**

Fo

## "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.

Bell & Roo General Store LLC	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	c.)
First organized, formed or incorporated under the laws of	
on 7/2/2021 (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization	:
Bell z Roo General Stare UC  (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 afte the date this document is filed by the Florida Department of State.)	r
<u>Note:</u> 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 20 day of December	_ <sub>20</sub> _2\
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:  Printed Name: There's a Corbett	Title: OWNOW
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Printed Name: Theresa Contact	Title: <u>Dianer</u>
Signature: Printed Name:	Title:
Signature:Printed Name:	
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
Signature: Printed Name:	Title:
Timed is and	
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 Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Loo General Stove U.C. de Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
he mailing address and street address of	of the principal office of the Limited Liability Compar
rincipal Office Address:	Mailing Address:
SDAS Midnight Dass Rd	Soas Midnight Pass Od Siesta Key, Th. 3222
5045 Midnight Pass Rd Siesta Key Fr. 3AZAZ	Siesta key, the 3222

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

ARTICLE I - Name:

Thuresa Cabet

Name

5045 Midnight Pass Rd

Florida street address (P.O. Box NOT acceptable)

Siesta Key FL 34242

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)

A	RT	$\Gamma \cap \Gamma$	E.	IV
-	N I	1 A . I	. r.	1 V -

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	Thursa' Carbell
	5005 Midnight Pass ld
	Siesta Key FL 2A2A2
	5105100 1001 10 1511111
	_
(Har attackment if a commit	
(Use attachment if necessary)	· · · · · · · · · · · · · · · · · · ·
	1.
LE V: Other provisions, if any.	<u>~</u>
211 vi sinei provisione, ii taly.	~~
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	8
AN AN AN A TRANSPORT AND AND A COMPANIES.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	

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