# 12200059301

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

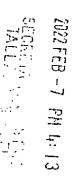
Office Use Only



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2/16/22



# **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.

The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  Silead Sanders LLNC
(Enter Name of Other Business Entity)
. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
irst organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
1/12/2017 n
(date of organization, formation or incorporation)
The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization lilead Sanders LLC
(Enter Name of Florida Limited Liability Company)
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
ne date this document is filed by the Florida Department of State.)  ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the occument's effective date on the Department of State's records.
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 appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signature of Authorized Representative:		
Printed Name: Marvin Dejean	Title: CEO	_
Signature(s) on behalf of Other Busines	s Entity: [See below for required signature(s)]	
Signature		
Printed Name: Marvin Dejean	Title: Sr. Managing Partner	- -
		_
Printed Name:	Title:	- -
Signature:		_
Printed-Name:		
Signature:	Title:	_
Printed Name:	Title:	-
Signature:	Title:	- <b>-</b>
Printed Name:	Title:	-
Signature:	Title:	<del>-</del>
Printed Name:	Title:	_
If Florida Corporation:	0.07	
Signature of Chairman, Vice Chairman, D If Directors or Officers have not been sele		
<u>If Florida General Partnership or Limi</u> Signature of one General Partner.	ted Liability Partnership:	
If Florida Limited Partnership or Limi	tad Linbility Limitad Dartnarchine	
Signatures of ALL General Partners.	ted Liability Elimited Farthership.	

\$25.00

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Articles of Conversion:

Certified Copy: Certificate of Status:

Fees for Florida Articles of Organization:

• :

ARTICLE I - Name: The name of the Limited Liability Company	is:	
Gilead Sanders LLC		
(Must contain the words "Limited Lia	ibility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	e principal office of the Limite	d Liability Company is:
Principal Office Address:	Mailing Address:	
4240 Oaks Terrace # 106	4240 Oaks Terrace # 106	
Pompano Beach, FL 33069	Pompano Beach, FL 3306	9
The name and the Florida street address of the Marvin Dejean N	he registered agent are:	
4240 Oaks Terrace # 106 Florida street address (	P.O. Box NOT acceptable)	
· ·	33060	
Pompano Beach	F <u>L</u> 33003 Zip	
City	Σij	
Having been named as registered agent an liability company at the place designate registered agent and agree to act in this can statutes relative to the proper and count	ed in this certificate, I hereby ac	ecept the appointment as ly with the provisions of all
accept the obligations of my position a	s registered agent as provided f	for in Chapter 605, F.S
accept the obligations of my position as	s registered agent as provided f	for in Chapter 605, F.S
accept the obligations of my position as  Registered Agent's	s registered agent as provided f	for in Chapter 605, F.S
accept the obligations of my position as  Registered Agent's	s registered agent as provided f	for in Chapter 605, F.S
accept the obligations of my position as  Registered Agent's	s registered agent as provided f	for in Chapter 605, F.S
accept the obligations of my position as  Registered Agent's	s registered agent as provided f	for in Chapter 605, F.S

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager Partner Mbr	Marvin Dejean 4240 Oaks Terrace # 106	- -
	Pompano Beach, FL 33069	_
-		<del></del>
		_
		- -
		<del>-</del>
(Use attachment if necessary)	SECKE TALL	2022 FE
ARTICLE V: Other provisions, if any.		₩ -7
	변경 , 155 1851	ch re
REQUIRED SIGNATURE:	77 (1) 77 (2)	<u>.</u>
This document is executed in accordance vany false information submitted in a docume as provided for in s.817.155, F.S.	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware ent to the Department of State constitutes a third degree fe	that lony
Marvin Dejean	ed or printed name of signee	_

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 5.00 Certificate of Status (Optional)

\$ 30.00 Certified Copy (Optional)

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

ARTICLE IV-