# 12200231910

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Dx	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF STATE FALL AHASSEE, FLORID:

## COVER LETTER

TO: New Filing S Division of C					•
SUBJECT: Project N	Momentum LLC				
		ulting	Florida Limite	ed Con	npany)
					d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all corr	espondence concerning	g this	s matter to:		
Maria M Centeno					
	(Contact Person)				
	(Firm/Company)				
3225 McLeod Dr. Suite	e 100				
	(Address)		<del></del>		
Las Vegas, NV 89121					
((	City, State and Zip Code)				
ra@andersonadvisors	.com				
E-mail Address: (to b	e used for future annual re	port n	otifications)		
For further information	on concerning this ma	tter. p	please call:		
Maria M Centeno		at (	800	706-4	4741
(Name of Conta	ct Person)	(	(Area Code)	(Day	time Telephone Number)
	or the following amou a bank located in the			ocess	ed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	■\$155.00 Filing Fees and Certificate of Status		180,00 Filing I Certified Copy		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add	ress:		<u> </u>	Street	Address:
New Filing So					filing Section
Division of C	•				on of Corporations
P.O. Box 632	1		·	The C	entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

### **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:  Project Momentum LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
02/04/2022 on
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Project Momentum 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 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.

TILED
2022 APR 19 AM 10: 16

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<u>&gt;</u>	: 16	

Signed this <u>06</u>	day of <u>April</u>	2022
Signature of Auth	orized Representative	of Limited Liability Company:
	· · · · · · · · · · · · · · · · · · ·	Title: Authorized Representative
Printed Name: Maria	a M Centeno	Title: Authorized Representative
Signature(s) on be	half of Other Business E	Entity:  See below for required signature(s)
	at Mariana	
Printed Name: Maria	a M Centeno	Title: Authorized Representative
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		Title:
Printed Name:		Title:
Signature:		Title:
Printed Name:		Title:
Signature:		Title:
Printed Name:		Title:
If Florida Corpora		
	ian, Vice Chairman, Dire	ctor, or Officer. d, an Incorporator must sign.
11 Directors of Office	eers have not been selecte	d. an incorporator must sign.
If Florida General Signature of one Ge	Partnership or Limited	Liability Partnership:
organitie or one de	merar naturet.	
		Liability Limited Partnership:
Signatures of ALL	General Partners.	

\$25.00

\$125.00

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

All others: Signature of an authorized person.

Articles of Conversion:

Certified Copy: Certificate of Status:

Fees for Florida Articles of Organization:

Fees:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Project Moment		ability Company, "L.L.C.," or "LLC.")	<del>_</del>	
ARTICLE II	- Address:			
The mailing ad	ldress and street address of the	e principal office of the Limited	Liability Com	pany is:
Principal Offi	ce Address:	Mailing Address:		
625 E. Twiggs S	Street, Suite 110	1705 Edgewater Dr #54056	4	
Tampa, FL 336	02	Orlando, Fl 23854		
		<del></del>		
(The Limited Liabil	ity Company cannot serve as its own R	ered Office, & Registered Ager egistered Agent. You must designate an in		
	h an active Florida registration.)			
The name and	the Florida street address of the	ne registered agent are:		
	Anderson Registered Agei		)022 ΣΕυ	
	Name			
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	625 E. Twiggs Street, Suit		2022 APR 19 SECRLTART ALLAHASSI	
	625 E. Twiggs Street, Suit		;¬, →	
	625 E. Twiggs Street, Suit	e 110	;¬, →	
	625 E. Twiggs Street, Suit Florida street address (I	e 110 P.O. Box <u>NOT</u> acceptable)	R 19 AM IO: 17	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

### ARTICLE IV-

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

<u>Title:</u>	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
MGR	Richard Soto		
	625 E. Twiggs Street, Suite 110		
	Tampa, FL 33602		
MGR	Sulim Soto		
	625 E. Twiggs Street, Suite 110		
	Tampa, FL 33602		
	1022 1022		
(Use attachment if necessary)	APR 19	<b>,</b>	
ICLE V: Other provisions, if any, awful Business Purpose	CELEGRANICE CONTRACTOR AND CONTRACTO	<b>.</b> 5	
<u> </u>	<del></del>		
	<del></del>		

REQUIRED SIGNATURE: \ ( Corp. bus

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.

Maria M Centeno, Authorized Representative

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)

April 13, 2022

Florida Division of Corporations New Filing Section P.O. Box 6327 Tallahassee, FL 32314

Re: Byron Road, Inc.

To Whom It May Concern:

Enclosed please find the following:

- Articles of Conversion; Articles of Incorporation; and
- A check for \$113.75 for the filing fees payable to Florida Division of Corporations; and
- A pre-addressed return envelope. Please use it to return the filed documents to me.

If you have any questions or concerns regarding this filing, I can be reached at 800-706-4741 or avogan@andersonadvisors.com.

Thank you,

Ari Vogan