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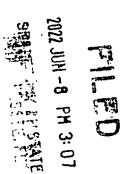
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
<u>_</u>
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
•
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to 1 limit Officer.

Office Use Only



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P21000100863 Luco Inc 400.03

FLORIDA DEPARTMENT OF STATE Division of Corporations

May 18, 2022

JEAN ANESCARD 6354 NW 26TH ST SUNRISE, FL 33313

SUBJECT: LUCO LLC Ref. Number: W22000064516 2022 JUST - 8 ANTIO: 16

We have received your document for LUCO 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):

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

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 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: 522A00011294

And 1880 - Please contact me as op. .

Nex 2000 64 516 Sost coes now February

Reported

8 50 275 6000 February

Promodement

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO:	New Filing Se Division of C				
SHRI	IECT: LUCO LI	.C			
3000	EC11	(Name of Res	sulting Florida L	imited Con	npany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	e return all corre	espondence concernin	g this matter t	o:	
JEAN	ANESCARD				•
		(Contact Person)			
LUCC) 				
		(Firm/Company)			
6354	NW 26TH ST				
		(Address)			
SUNF	RISE, FLORDIA	33313			
	((City, State and Zip Code)	-		
SAYV	VYNINC@YAHO	O.COM			
E-r	nail Address: (to b	e used for future annual re	port notification	s)	
For fu	ırther informati	on concerning this ma	ater, please ca	11:	
rochro	och907@gmail.co	om	at (665-	5250
	(Name of Conta	ict Person)	(Area Co	ode) (Day	ytime Telephone Number)
		or the following amou a bank located in the			sed by this office must be payable in US
(\$25 fd & \$12:	60.00 Filing Fees or Conversion 5 for Articles anization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Fi and Certified		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New Divis The O 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303

Articles of Conversion

For

"Other Business Entity"

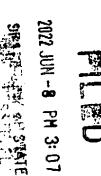
Into

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.

LUCO INC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
NOV 30, 2021
NOV 30, 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:
LUCO 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.



Signed this MAY day of 27 and	20 2022
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: JEAN ANESCARD	_ Title: MEMBER
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Jeen A Nes Card	Title: Uema
Signature:Printed Name:	
Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of 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.	corporator must sign. ty Partnership:
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

LUCO LLC	1177 G W 1 G T W 1 G T
(Must contain the words "Limited L	liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	he principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6354 NW 26TH ST	6354 NW 26TH ST
SUNRISE, FL 33313	SUNRISE, FL 33313
	
_	
The name and the Florida street address of JEAN ANESCARD	the registered agent are:
JEAN ANESCARD	
JEAN ANESCARD 6354 NW 26TH ST	
JEAN ANESCARD 6354 NW 26TH ST	Name
JEAN ANESCARD 6354 NW 26TH ST Florida street address	Name (P.O. Box <u>NOT</u> acceptable)

(CONTINUED)

ARTICLE IV-

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	
JEAN ANESCARD	JEAN ANESCARD
	6354 NW 26TH ST
	SUNRISE , FL 33313
	A 4-8-118-
	<u> </u>
	, 144-1,
	N
(Use attachment if necessary)	
(Ose attachment if necessary)	
	ेर्न्द -
CLE V: Other provisions, if any.	
SEE IT Said provisions, it may.	
REQUIRED SIGNATURE:	
A.A.	
\mathcal{O}	
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 the
as provided for in s.817.155, F.S.	ment to the Department of State constitutes a third degree feld
JEAN ANESCARD	
Tv	ped or printed name of signee
· ·	Provide the control of the control o

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)