L22000265570

(Re	questor's Name)				
(Address)					
(Address)					
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	MAIT	MAIL			
(Bu	siness Entity Nar	me)			
(Do	cument Number)				
Certified Copies	_ Certificates	s of Status			
Special Instructions to	Filing Officer:				





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SECRETARY OF STATE
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D. O'KEEFE JUN 1 4 2022

W22-28472



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

March 4, 2022

DIANA SATURNA THE LIGHT WITHIN LLC 3424 PARKRIDGE CIR. SARASOTA, FL 34243

SUBJECT: THE LIGHT WITHIN LLC

Ref. Number: W22000028472

We have received your document for THE LIGHT WITHIN 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):

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 LO'KEEFE Regulatory Specialist II

Letter Number: 522A00005362

COVER LETTER

Division of Corporations	
SUBJECT: The land the Name of Resulting Florida Limit	ed Company)
The enclosed Articles of Conversion, Articles of Organizati Business Entity" into a "Florida Limited Liability Company	
Please return all correspondence concerning this matter to:	
(Contact Person)	
The Light Within LLC (Firm/Company)	
3424 Parkeringer Cir. (Address)	
Surasota, Fl 34243	
(City, State and Zip Code) (City, State and Zip Code)	C. Com
For further information concerning this matter, please call:	
(Name of Contact Person) at (1009 (Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks p dollars and drawn on a bank located in the United States)	rocessed 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 and Certified Cope and Certified Cope Status	
Mailing Address: New Filing Section Division of Corporations	Street Address: New Filing Section Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32314

P.O. Box 6327

TO: New Filing Section

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:
(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)
on April 2016. (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
The Light Within 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.

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Signed this 2nd day of February 20 22.
Signature of Authorized Representative of Limited Liability Company:
Signature of Authorized Representative: Printed Name: Ann Satvan Title: Agent
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature: 1. Signature: Title: Clara- Hagent
Signature: Title:
Signature:
Signature: Title:
Signature: Printed Name:Title:
Signature:
Printed Name: 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:

Certified Copy: Certificate of Status:

Fees for Florida Articles of Organization:

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

(Must contain the words "Limited Liability Company, "L.L.C.." or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	<u>Mailing Address:</u>
3424 Parkridge Cir.	34.34 Parkedie Co
Sarasota, FL	Sacuscia, FL
34243	34343

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:

Name

Name

Name

Name

Name

Name

Norice date (r. Jate (r. Jate

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)

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

Name and Address:
Diane-Saturne- 34.24 parkridge (in Sarasota, EL
34243
SLUMETAN SALLAHASS
Art 9: I
an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony bed or printed name of signee Filing Fees
ped or printed name of signee Filing Fees
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)