# Laa000302605

(Re	questor's Name)	
(Ad	dress)	<del></del>
(Ad	dress)	
(Cit	ty/State/Zip/Phone #/	)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)	ı
(Do	cument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only



000389597550

08/21/22--01037--004 \*\*150.00

S. CHATHAM JUL - 9 2022







## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form to convert an "Other Business Entity" into a "Florida Limited Liability Company" pursuant to section 605.1045, Florida Statutes. These forms are basic and may not meet all conversion needs. The advice of an attorney is recommended.

Pursuant to s. 605.0102(23)a, F.S., entity means: a business corporation, a nonprofit corporation, a general partnership, including a limited liability partnership, including a limited partnership, including a limited liability limited partnership; a limited liability company; a real estate investment trust; or any other domestic or foreign entity that is organized under an organic law.

Filing Fees:

\$150.00 (\$25 for Articles of Conversion and

\$125 for Articles of Organization)

Certified Copy (optional):

\$30.00

Certificate of Status (optional):

\$5.00

Send one check in the total amount payable to the Florida Department of State.

Please include a cover letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

Mailing Address:

New Filing Section
Division of Corporations
P.O. Box 6327

1.**O**. **DO**X 0327

Tallahassee, FL 32314

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

For further information, you may contact the New Filing Section at (850) 245-6052.

Important Notice: As a condition to the conversion, pursuant to s.605.0212(9), F.S., each party to the conversion must be active and current through December 31 of the calendar year this document is being submitted to the Department of State for filling.

INHS11 (7/17)

### **COVER LETTER**

TO:	New Filing So Division of Co						
SUBJ	ест:А	Je Sto April (Name of Res	ulting Florida Limi	MA ted Dom	pany)		
The cr Busin	i <b>closed</b> Articles ess Entity" into	s of Conversion, Artic a "Florida Limited Li	les of Organizati ability Company	on, and	I fees are submitted to convectordance with s. 605.1045, l	ert an "C F.S.	Other
Please	return all corre	espondence concerning	g this matter to:				
	Kanneth	(Contact Person)		-			
	878 N	(Firm/Company)	Court	-			
		City, State and Zip Code)		-			
E-n	Keviny 4 7 and Address: (to b	Woymai); (om e used for future annual re	port notifications)	-			
For fu	rther information	on concerning this ma	tter, please call:				
	(Name of Conta	desto (Person)	_at ( <u>20^3</u> (Area Code		ime Telephone Number)		
		or the following amou a bank located in the	•	)rocesse	ed by this office must be pay	yable in	US
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles nization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
	Mailing Addr New Filing So Division of C P.O. Box 632 Tallahassee, F	ection orporations 7		New F Division The Co 2415 N	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	22.5UH 21 FF	ž

INHS11 (7/17)

### **Articles of Conversion**

For

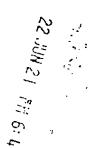
### "Other Business Entity"

Into

#### Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization 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:
Agosto apex Training LLC (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Ago 4+0 ADEX + TRILING INC.  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country)
on 2116/22 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 2/16/22.  (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 5 day of 25	_20 <u>_2み</u>
Signature of Authorized Representative of Limi	
Signature of Authorized Representative:	Mile: Pres
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
// Memoria	
Signature: Kenny Hyorto Printed Name: Kenneth Agorto	
Printed Name: Kenneth Agozto	_ little: _ Pres
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Circumstance .	
Signature: Printed Name:	Title
Printed Name:	11de
Signature:	
Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	
,	
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnershin:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE 1 - Name:** 

The name of the Limited Liability Company is:

Agos to apex train (Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
77.78 Ningra Falls Court Orlando, Fl. 32825	7878 Allaura Falls Court Orlando, FP-32825
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	

7878 Niagra Fulls Court
Florida street address (P.O. Box NOT acceptable)

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

Kenneth Ayosto Name

Orgando FL 32825 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)

#### **ARTICLE IV-**

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

"AMBR" = Authorized Member	
"MGR" = Manager Pres	Kenny Agosto
pres	76 78 Niagra Falls Court
	Orlando A. 32725
(Use attachment if necessary)	
•	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
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CLE V: Other provisions, if any.	
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	Ayos 10
REQUIRED SIGNATURE:  Signature of a member or	Asco 10
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware t
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	
Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes. I am aware to the Department of State constitutes a third degree fel
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Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes. I am aware to the Department of State constitutes a third degree fel

Cover letter Kennety Agosto refurn:

7878 Niagra Falls Court, Orlando FL 32825 Telephone 203 430 2904