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

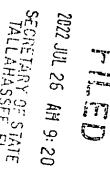




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Articles of Conversion

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 fifing of the Articles of Conversion is: Stelly Investments LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company (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)
09/28/2021
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Stelly Investments 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.)
<u>Note:</u> 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

 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.

2022 JUL 26 AH 9: 19
SECRETARY OF STATE
TALLAHASSEF TATE

Signed this 13th day of July	20_22
Signature of Authorized Representative of Lin	
Signature of Authorized Representative 2000 Printed Name: Adam Stelly	AL GATUM Inte: Member
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Adam Stelly Printed Name: Adam Stelly	Title: Member
Signature: Printed Name:	
Signature: Printed Name:	Title:
Signature: Printed Name:	Title
Signature: Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ity Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
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)

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SECRETARY OF STATE
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Stelly Investm	ents LLC	
(M)		bility Company (E.E.C. for (EEC.))	
ARTICLE II - Ac	4.1		
		principal office of the Limited Liability Comp	any is
· · · · · · · · · · · · · · · · · · ·	are the street address of the	. principal office of the failined failourly comp	7,111,4
Principal Office /	<u> Address:</u>	Mailing Address:	
Eddd Danta Varda F	. .	544.0	
5414 Ponte Verde D Pensacola, FL 3250		5414 Ponte Verde Dr	
ensacola, FE 3230)	Pensacola, FL 32507	
The Cimited Liability C business entity with an	legistered Agent, Registe ompany cannot serve as its own R active Florida registration (Florida street address of th	red Office, & Registered Agent's Signature: egistered Agent You must designate an individual or another de registered agent are:	
The Cimited Clability C business entity with an	ompany cannot serve as its own R active Horida registration (restered Accut. You must designate an individual or another are registered agent are:	
The Cimited Clability C business entity with an	ompany cannot serve as its own R active Florida registration r Florida street address of the	restered Accut. You must designate an individual or another are registered agent are:	
The Cimited Clability C business entity with an	ompany cannot serve as its own R active Florida registration r Florida street address of the	restered Accut. You must designate an individual or another are registered agent are: Stelly ime	
The Cimited Clability C business entity with an	ompany cannot serve as its own R active Florida registration (Florida street address of the Adam) N 5414 Ponte N	restered Accut. You must designate an individual or another are registered agent are: Stelly ime	
The Comited Cubility Coursess entity with an	ompany cannot serve as its own R active Florida registration (Florida street address of the Adam) N 5414 Ponte N	restered Acent. You must designate an individual or another are registered agent are: Stelly Ime /erde Dr	
The Comited Cability Coursess entity with an	ompany cannot serve as its own R active Florida registration r Florida street address of th Adam's S414 Ponte s Florida street address (I	restered Acent. You must designate an individual or another the registered agent are: Stelly time Verde Dr 2.O. Box NOT acceptable)	

(CONTINUED)

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 AMBR	Adam Stelly
144011	5414 Ponte Verde Dr
	Pensacola, FL 32507
	
(Use attachment if necessary)	
rese underment in necessary;	
RTICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	1
1	1 SANN
N	MANY NINNY

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, 1 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.

Adam Stelly

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent 3 0.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE