12200341530

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W8200093919

Office Use Only



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07/07/22--01017--017 **185.00



2011 - FIFTE: 17

July 18, 2022

GEORGIA JOHNSON 16640 SW 107 CT MIAMI, FL 33157

SUBJECT: TRAINING WITH GEORGIA, LLC

Ref. Number: W22000093919

We have received your document for TRAINING WITH GEORGIA, LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

The registered agent must sign accepting the designation.

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.

Karen Lovelace Regulatory Specialist II

Letter Number: 922A00015946

Articles of Conversion

For

"Other Business Entity"

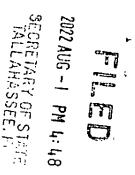
Into

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: TRAINING WITH GEORGIA, INC	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a (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.))
FLORIDA First organized, formed or incorporated under the laws of	
First organized, formed or incorporated under the laws of	
12/01/2020 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:	
TRAINING WITH GEORGIA, 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	

- 5. The plan of conversion has been approved in accordance with an 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 4th d	ay of APRIL	20	
Signature of Authorize	d Representative	of Limited Liability Company	<u>′:</u>
Signature of Authorized Printed Name: <u>Georgia Jol</u>	Representative:	Title: Manager	-
		Entity: See below for required	
Signature: Young	Johnson	Title: Mayage	<u> </u>
Signature:Printed Name:		Title:	
		Title:	
Signature:Printed Name:		Title:	
Signature:Printed Name:		Title:	
Signature:Printed Name:		Title:	
If Florida Corporation: Signature of Chairman, V If Directors or Officers ha	ice Chairman, Dire ve not been selecte	ector, or Officer, ed, an Incorporator must sign.	
If Florida General Parti Signature of one General		l Liability Partnership:	
If Florida Limited Partr Signatures of ALL Gener	i <mark>ership or Limited</mark> al Partners.	I Liability Limited Partnership	<u>i</u>
All others: Signature of an authorized	l person.		
Fees:			
Articles of Convo	ersion:	\$25.00	

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

\$125.00

\$30,00 (Optional)

\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na	mar	
	ine. .imited Liability Compat	ny is:
	•	
Training With Goorg	ria II.C	
Training With Georg	ust contain the words "Limited I	liability Company, "L.L.C.," or "L.L.C.")
ARTICLE II - A	ddress: see and struct address of t	he principal office of the Limited Liability Company is:
The maning addre	iss and succeadaress or t	ne principal arrives or the Samuel Lambing Company
Principal Office	<u>Address:</u>	Mailing Address:
16640 SW 107 CT		16640 SW 107 CT
Miami, FL 33157		Miami, FL 33157
	No. 1 April 1 Dunie	Annual Office C. Dogistored Agent's Signature
(The Limited Liability C	Cegistered Agent, Regis Company cannot serve as its own	tered Office, & Registered Agent's Signature: 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:
	0	
	Georgia Johnson	Name
		Turne
	16640 SW 107 CT Miam	
	Florida street address	(P.O. Box <u>NOT</u> acceptable)
	Miami	FL_33157
	City	Zip
liability comp registered agent statutes relatin	pany at the place designa and agree to act in this of ag to the proper and comp	and to accept service of process for the above stated limited ted in this certificate. I hereby accept the appointment as capacity. I further agree to comply with the provisions of ablete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, F.S
	Donne Registered Agents	Signature (REQUIRED)

(CONTINUED)

FILED
2022 AUG -1 PM 4: 48
SECRETARY W. STATE
TALLAHASSE STATE

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

'AMBR" = Authorized Member	
'MGR" = Manager	On a win Jahanan
MGR	Georgia Johnson
	16640 SW 107 CT
	Miami, FL 33157
	Page 4
Use attachment if necessary)	
Use attachment if necessary) "E V: Other provisions, if any.	
·	
.E V: Other provisions, if any.	
LE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware ament to the Department of State constitutes a third degree fe
EV: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S. Georgia Johnson	re with section 605,0203 (1) (b), Florida Statutes, I am aware ument to the Department of State constitutes a third degree for the Department of State constitutes as the degree of the Department of State constitutes as the degree of the Department of State constitutes as the degree of the Department of State constitutes as the degree of the Department of State constitutes as the degree of the Department of State constitutes as the degree of the Department of State constitutes as the degree of the Department of State constitutes as the degree of the Department of State constitutes as the degree of the Department of State constitutes as the degree of the Department of State constitutes as the degree of the Department of State constitutes as the degree of the Department of State constitutes as the degree of the Department of State constitutes as the degree of the Department of State constitutes as the degree of the Department of State constitutes as the Department of State constitutes as the Department of St
E V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S. Georgia Johnson	re with section 605.0203 (1) (b), Florida Statutes. I am aware ument to the Department of State constitutes a third degree fe

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ECRETARY OF STE