Laa 600350630

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
,
(Document Number)
Certified Copies Certificates of Status

Special Instructions to Filing Officer:
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Received 07/72
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04/18/22--01049--002 **128.75

07/12/22--01027--023 ++51.25

22 JUL 12 TH 6: 17



May 13, 2022

JOANNE FARRAR CPA PA 12773 W FOREST HILL BLVD, SUITE 1201 WELLINGTON, FL 33414 US

SUBJECT: MORGAN PAUL LLC Ref. Number: W22000061440

We have received your document for and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a fee of \$51.25 due.

According to Florida Statute 605, limited liability companys cannot domesticate and only can convert. Attached are Articles of Conversion with the Articles of Organization for limited liability companys with instructions for your convenience.

If you have any further questions concerning your document, please call (850) 245-6052.

Letter Number: 322A00011011

Summer Chatham Regulatory Specialist II New Filing Section

22.011/2 11/6/17

JOANNE FARRAR CPA PA

2022 JUL 12 AH IO: 05

12773 W Forest Hill Blvd, Suite 1201 Wellington, FL 33414 joanne@wellingtoncpa.net

Phone: (561)790-2092 | Fax: (561)282-3248



July 1, 2022

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

RE: Articles of Conversion - Morgan Paul LLC

Enclosed please find Articles of Conversion to file with the State of Florida regarding Morgan Paul LLC. We previously filed Articles of Domestication in this matter with payment in the amount of \$128.75 (see attached copy of check). However, we were informed that the State of Florida does not accept Articles of Domestication but rather, we would need to file Articles of Conversion. Therefore, we are enclosing a check for the balance due to file the enclosed Articles of Conversion. If you have any questions or need to provide further instructions, please contact our office.

Thank you for your assistance in this matter,

JOHNSE FORMAN Johnne Farrar CPA PA

52.Mil 12 Pil El 12

COVER LETTER

TO: New Filing Section Division of Corporations

INHS11 (7/17)

SUBJECT: MORGA	N PAUL LLC			
	(Name of R	esulting Florida Limi	ted Company)	_
			ion, and fees are submitted to y" in accordance with s. 605.	
Please return all corr	respondence concerni	ng this matter to:		
JOANNE FARRAR				
	(Contact Person)		-	
JOANNE FARRAR C	PA PA			
	(Firm/Company)	<u> </u>	-	
12773 WEST FORES	T HILL BLVD, SUITE 1	201		
· · · · · · · · · · · · · · · · · · ·	(Address)		-	
WELLINGTON, FL 33	414			
(City, State and Zip Code	1	-	
ADMIN@WELLINGTO	ONCPA.NET			
E-mail Address: (to	be used for future annual	report notifications)	-	
For further informat	ion concerning this m	atter, please call:		
JOANNE FARRAR		at (⁵⁶¹	790-2092	
(Name of Cont	act Person)		(Daytime Telephone Number)	_
	for the following ame a bank located in the		processed by this office must	be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) Mailing Add New Filing S Division of C P.O. Box 633 Tallahassee,	Section Corporations 27	Sulon	Certified Copy, and Certificate of Status	# Balance due # 51.25

Articles of Conversion For "Other Business Entity"

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.

The name of the "Other Business Entity" immediately prior to the fili MORGAN PAUL LLC	ng of the Articles of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a LIMITED LIABILITY CORPORATION	
(Enter entity type. Example: corporation, limited partnership, general p	artnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a n	on-U.S. entity, the name of the country)
07/16/2019 On	
(date of organization, formation or incorporation)	
The name of the Florida Limited Liability Company as set forth in the MORGAN PAUL 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 no 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 requirement's effective date on the Department of State's records.	uirements, this date will not be listed as the
5. The plan of conversion has been approved in accordance with all appli	cable statutes.
6. The "Converted or Other Business Entity" has agreed to pay any member	s having appraisal rights the amount to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 15 day of June 20/22
Signature of Authorized Representative of Limited Liability Company:
Signature of Authorized Representative: Printed Name: MORGAN PAUL Title: MEMBER
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature:
Signature: 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.
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)

- 10 112 PH 6: 15

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compa	nny is:
The fame of the Billion Blacking Compa	
MORGAN PAUL LLC	
(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:	Mailing Address:
15610 ENSTROM ROAD	15610 ENSTROM ROAD
WELLINGTON, FL 33414	WELLINGTON, FL 33414
ARTICLE III - Registered Agent, Regi	istered Office. & Registered Agent's Signature:
The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	istered Office, & Registered Agent's Signature: a Registered Agent. You must designate an individual or another of the registered agent are:
The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of	n Registered Agent. You must designate an individual or another
The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	n Registered Agent. You must designate an individual or another
The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of	n Registered Agent. You must designate an individual or another of the registered agent are:
The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of MORGAN PAUL 15610 ENSTROM ROA	n Registered Agent. You must designate an individual or another of the registered agent are:
The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of MORGAN PAUL 15610 ENSTROM ROA	n Registered Agent. You must designate an individual or another of the registered agent are: Name

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:

<u>Title:</u>	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
AMBR	MORGAN PAUL		
	15610 ENSTROM ROAD		
	WELLINGTON, FL 33414		
(Use attachment if necessary)			
CLE V: Other provisions, if any.			
REQUIRED SIGNATURE:	Λ		
000 //2			
	X		
	an authorized representative of a member		
Signature of a member or	22 24		
This document is executed in accordance	e with section 605,0203 (1) (b), Florida Statutes, I am aware		
This document is executed in accordance any false information submitted in a docu	e with section 605.0203 (1) (b), Florida Statutes. I am aware		
This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes. I am aware sument to the Department of State constitutes a third degree fe		

Typed or printed name of signee

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)