# L22000355580

(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:

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FRANCHISING
DIVISION OF CORPORATIONS
TALL ATTASSLE, FLORIOA

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## **COVER LETTER**

TO:	New Filing So Division of C				
CHRI	ECT: THAT'S	•			
SUBJ	EC1	(Name of Res	sulting Florida Limit	ed Con	npany)
			•		d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	return all corre	espondence concernin	g this matter to:		
LEO J	HERMES				
		(Contact Person)			
THAT'	S MY GEEK LLC				
	1	(Firm/Company)			
4520 E	BRANDYWINE D	)R			
_		(Address)			
BOC A	RATON	,			
		21. (). 1. 1. 1. (). (). (). (). (). (). (). (). (). ()			
A D A D	-	City, State and Zip Code)			
	DEM@YAHOO.				
1:-N	nail Address: (to b	e used for future annual re	port notifications)		
For fu	rther information	on concerning this ma	tter, please call:		
LEO J	HERMES		_at (	<sub>\</sub> 8150	874
	(Name of Conta	ct Person)	(Area Code)	(Day	rtime Telephone Number)
		or the following amou a bank located in the		roces	sed by this office must be payable in US
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles anization)	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 Add New Filing So Division of C P.O. Box 632	ection orporations		New Divis	t Address: Filing Section ion of Corporations Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

# **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: THAT'S MY GEEK LLC
(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
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
3/19/2018 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:
THAT'S MY GEEK 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
which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.
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Signed this 31 day of JULY	20
Signature of Authorized Representative of Limi	ted Liability Company:
	a a a comple
Signature of Authorized Representative:  Printed Name LEO J HERMES	Title: OWNER
Printed Name: LEO J HERMES	Title: OWNER ·
Signature(s) on behalf of Other Business Entity:	See helow for required signature(s)
Signature: AMA ACC	
Signature: Printed Name: LEO JHERMES	Title: OWNER
Timed Name.	1100.
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Classification	
Signature:Printed Name:	Title
rimed Name.	
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
tern that to the analysis to the lift have	
If Florida Limited Partnership or Limited Liability	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
g	
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)
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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR ARTICLE I - Name: The name of the Limited Liability Company		WILLIT COMPANY
THAT'S MY GEEK LLC		
(Must contain the words "Limited Li	ability Company, "L.L.C" or "LLC.")	)
ARTICLE II - Address: The mailing address and street address of the	ne principal office of the Limi	ted Liability Company is:
Principal Office Address:	Mailing Address:	
4520 BRANDYWINE DR	4520 BRANDYWINE DR	<u> </u>
BOCA RATON FL 33487	BOCA RATON FL 33487	·
The name and the Florida street address of to LEO J HERMES  N  4520 BRANDYWINE DR	the registered agent are:	
	P.O. Box NOT acceptable)	
BOCA RATON	FL <sup>33487</sup>	
City	Zip	
Having been named as registered agent as liability company at the place designate registered agent and agree to act in this castatutes relating to the proper and comple accept the obligations of my position as Registered Agent's	ed in this certificate, I hereby a upacity. I further agree to com lete performance of my duties,	accept the appointment as apply with the provisions of all and I am familiar with and
	TINUED)	2022 AUG -4 AH 7: 42  CASSIL AND JOR VIDEO FRANCHISING DIVISION OF CORPORATIONS TALLAHAS SEE, FLORIDA

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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	
"MGR" = Manager	
	<del></del>
•	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
•	
DEQUIDED SIGNATUDE.	
REQUIRED SIGNATURE:	
( 4	
Signature of a member or a	an authorized representative of a member
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware that
	ment to the Department of State constitutes a third degree felony.
any false information submitted in a docur as provided for in s.817.155, F.S.	them to the Department of State computates a time degree leiony

Typed or printed name of signee

### Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 5.00 Certificate of Status (Optional) \$ 30.00 Certified Copy (Optional)