Laa0004a9109

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

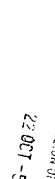
Office Use Only



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S. CHATHAM OCT -5 2022

2022 OCT -5 PM 1: 43





COVER LETTER

TO:	New Filing S Division of	Section Corporations			
CHIDI		99 Ventures, LLC			
3083	EC1:		sulting Florida Li	nited Co	empany)
The en Busine	nclosed Article ess Entity" int	es of Conversion, Artico o a "Florida Limited L	cles of Organiz iability Compa	ation, a ny" in a	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please	return all cor	respondence concernir	ng this matter to) ;	
Andrea	ı Chacin				
		(Contact Person)		_	
York H	Owell				
		(Firm/Company)		_	
10610	South Jordan G	ateway, Suite 200			
		(Address)		_	
South .	Jordan, Utah 84	1020			
_	(City, State and Zip Code)			
andrea	@yorkhowell.ca	om			
E-m	ail Address: (to b	e used for future annual re	port notifications)		
For fur	ther informati	on concerning this ma	tter, please call	:	
Andrea	Chacin		_at (⁸⁰¹	527-	1040
	(Name of Conta	act Person)	(Area Cod	c) (Day	ytime Telephone Number)
Enclos dollars	ed is a check to and drawn on	for the following amou	int: (All checks United States)	proces	sed by this office must be payable in US
(\$25 for	.00 Filing Fees Conversion for Articles nization)	\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filin and Certified Co		Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New Division The Control	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

10/05/22

NAME: GROWTH 99 VENTURES, LLC

TYPE OF FILING: CONVERSION

COST:

155.00

RETURN: PLAIN COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

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: Growth 99 Ventures, 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)
(Enter state, or if a non-U.S. entity, the name of the country)
March 4, 2022
March 4, 2022 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Growth 99 Ventures, 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.

- 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 2	29th day of September	20
Signature o	f Authorized Representativ	e of Limited Liability Company:
		Cameron Hemphill Title: Manager
Printed Name	:Cameron Hemphill	Title: Manager
	Came you be made ill	Entity: [See below for required signature(s)]
Printed Name	Cameron Hemphill	Title: Member
		•
Printed Name	<u> </u>	Title:
Signature:		
Printed Name	;* !*	Title:
Signature:		
Printed Name		Title:
Signature:	<u> </u>	
1 miled Hanie	· <u> </u>	Title:
Signature:		
Printed Name		Title:
lf Directors or If Florida Ge	hairman, Vice Chairman, Dir	ed, an Incorporator must sign.
If Florida Lin Signatures of	nited Partnership or Limited ALL General Partners.	d Liability Limited Partnership:
All others: Signature of a	n authorized person.	
Fees:		
F cc s fo Certifi	es of Conversion: or Florida Articles of Organiz ed Copy: cate of Status:	\$25.00 zation: \$125.00 \$30.00 (Optional) \$5.00 (Optional)

DIVISION OF CORPERATIONS
22 DCT -5 PH 3: 1

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is);	
Growth 99 Ventures, LLC		
(Must contain the words "Limited Liabil	ity Company, "L!L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the p	principal office of the Limited Liabil	lity Company is:
Principal Office Address:	Mailing Address:	
13 Heartwood St	13 Heartwood St	
Inlet Beach, FL 32461	Inlet Beach, FL 32461	
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	d Office, & Registered Agent's Si stered Agent. You must designate an individual	gnature: or another
The name and the Florida street address of the	registered agent are:	SECRI VISION 2 BCT
Paracorp Incorporated		1 S T T T T T T T T T T T T T T T T T T
Nam	ne	-: GAL
155 Office Plaza Drive,	1st Floor	e ORA
Florida street address (P.C	D. Box NOT acceptable)	LED YOF STATE ORPORATIONS PM 3: 16
Tallahassee	FL 32301	W
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.

Jody Moua, Assistant Secretary
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

Cameron Hemphill 13 Heartwood St Inlet Beach, FL 32461 Use attachment if necessary) E V: Other provisions, if any.	"MGR" = Manager	Name and Address:		
13 Heartwood St Inlet Beach, FL 32461 Use attachment if necessary) E V: Other provisions, if any.		Camaton Hemohill		
Use attachment if necessary) E V: Other provisions, if any.				
Use attachment if necessary) E V: Other provisions, if any. EQUIPED SIGNATURE:				
Use attachment if necessary) E V: Other provisions, if any. EQUIPED SIGNATURE:				
Use attachment if necessary) E V: Other provisions, if any. EQUIRED SIGNATURE:				
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Use attachment if necessary) E V: Other provisions, if any. EQUIRED SIGNATURE:				
E V: Other provisions, if any.				
I I AMEPOLE PREMOLULE	EV: Other provisions, if any. REQUIRED SIGNATURE: Cameron Hemphill			