# L22006474760

(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:

Office Use Only



700396332617

10/31/22--01036--007 \*\*150.00

22 OCT 31 M 63 II SECRETARY BY STA



#### **COVER LETTER**

то:	New Filing So Division of C	orporations			_	
SUBJ	ECT:	THEORY Y	SEARCY	d i	LC	
0000		(Name of Re	sulting Florida Limi	ted Com	npany)	
					d fees are submitted to convectordance with s. 605.1045.	
Please	return all corre	espondence concernir	ng this matter to:			
_ <u>}</u>	HARIA HEORY Y	MEALLY (Contact Person) SEARCH LL (Firm/Company)	<u>C</u>	- -		
<u>562</u>	1 COXC	H HOUSE CI	RCLE, Un	1+ 6		
	laria @	(Address)  FLORIC  City, State and Zip Code)  THEORY / SEA  e used for future annual re	IRCH COM	36		
		on concerning this ma	•		,7	
Enclos	(Name of Conta sed is a check f s and drawn on		unt: (All cheeks p		time Telephone Number)	·
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles inization)	S155.00 Filing Fees and Certificate of Status			□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	6: 1.6
	Mailing Adde New Filing Sc Division of C P.O. Box 632 Tallahassee, H	ection orporations 7		New F Divisi The C 2415 I	Address: Filing Section on of Corporations fentre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303	

# **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:
THEORY Y SEARCH LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a SCOKP
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of NEW YORK
(Enter state, or if a non-U.S. entity, the name of the country)
on Ob 17 2020 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization
THEORY Y SEARCH 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 calendary 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.

\$5.00 (Optional)

Certificate of Status:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

THEORY Y SEXECH	LLC
(Must contain the words "Limited Liability	
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5621 COACH HOUSE GRELE Unit E, BOCA RATON, FLORIDA, 33486	JUNIFE BOCA RATION, FLORIDA, 33486
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	
The name and the Florida street address of the re-	egistered agent are:
Melody E. Co	bbe 59
	North Federal Hwy, Suite 110
Florida street address (P.O.	Box NOT acceptable)
Boxa Raton	FI 33432 EA B T
City	FL 33432
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated imited this certificate. I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S

(CONTINUED)

Title:	Name and Address:  Maria Heally  5621 Coach House circle Un				
"AMBR" = Authorized Member "MGR" = Manager					
<del></del>					
	Boca Vlaton Florida				
	33486				
(Use attachment if necessary)					
CLE V: Other provisions, if any.	$\overline{\nu}_{co}$				
<u> </u>					
REQUIRED SIGNATURE:	SSER 32 F				
4					
This document is executed in accordance any false information submitted in a document and false information submitted in a document.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that nent to the Department of State constitutes a third degree felony				
as provided for in s.817.155, F.S.  Maria Heall					

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)

ARTICLE IV-