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COVER LETTER

TO: New Filing Section Division of Corporations

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Concer Carn (Contact Person) CER Accounting and Tay Service In (Firm/Company) <u>AS345 Bock Rd Suite 302</u> (Address) <u>Wirom MI 483973</u> (City, State and Zip Code) E-mail Address: (to-be used for future annual report notifications) - COM

For further information concerning this matter, please call:

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

(\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	S185.00 Filing Fees, Certified Copy, and Certificate of Status
<u>Mailing Addı</u> New Filing Se Division of C P.O. Box 632 Tallahassee, F	ection orporations 7	New Divis The C 2415	<u>t Address:</u> Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303



(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 chilled under ss. 605.1006 and 605.1061-605.1072, F.S.



Signed this 23 day of <u>Necember 20</u> 22
Signature of Authorized Representative of Linvited Liability Company:
Signature of Authorized Representative: <u>Find Develop</u> Printed Name: <u>Robert Derosecu</u> Title: <u>Mersbre</u>
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature:
Signature:
Signature:Title:Title:
Signature: Title: Title:
Signature:Title:
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:\$25.00Fees for Florida Articles of Organization:\$125.00Certified Copy:\$30.00 (Optional)Certificate of Status:\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is:

	Veterans	POLICIALUG	shing	LLC	<u> </u>
(Must c	ontain the words "Limite	d Liability Company, "L.I	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 Ad	dr <u>ess:</u>	Mailing Address:
35981 54	ddle Palm Way	Same
_Z=phyrh	ILS_F1 33541	
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ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own 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:



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. Thereby 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.

Rebert Dam	(1 ¹) 2022
Registered Agent's Signature (REQUIRED)	
(CONTINUED)	CHISING CORPORATIONS

ARTICLE IV-

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

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<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager <u>AMBR & Map</u>	<u>Robert Deröskan</u> <u>35981 Saddle Palm</u> Wa Zephyrhills El 3354		
(Use attachment if necessary)			
ARTICLE V: Other provisions. if any.			
REQUIRED SIGNATURE:	- Dez		
This document is executed in accordance v any false information submitted in a docum as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree telony $\frac{1}{24}$ $\frac{1}{2222424}$ bed or printed name of signce		
	Filing Fees f Organization and Designation of Registered Agent		