

L23006033202

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☒ PICK-UP ☐ WAIT ☐ MAIL

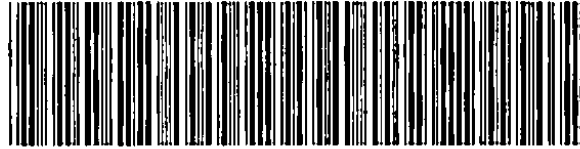
(Business Entity Name)

(Document Number)

Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Instructions to Filing Officer:

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## COVER LETTER

New Filing Section  
Division of Corporations

CT: Ynot M, LLC  
(Name of Resulting Florida Limited Company)

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

Return all correspondence concerning this matter to:

J. Whitehouse, Esq.  
(Contact Person)  
use & Cooper, PLLC  
(Firm/Company)  
rk Center Drive, Unit 2M  
(Address)  
, FL 32835  
(City, State and Zip Code)

avantyhealth.com  
Email Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

J. Whitehouse, Esq. at (321) 285-2300  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

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)

<input type="checkbox"/> \$0 Filing Fees for Conversion or Articles (Organization)	<input type="checkbox"/> \$155.00 Filing Fees and Certificate of Status	<input type="checkbox"/> \$180.00 Filing Fees and Certified Copy	<input type="checkbox"/> \$185.00 Filing Fees, Certified Copy, and Certificate of Status
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### Mailing Address:

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

### Street Address:

New Filing Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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**Articles of Conversion**  
For  
**"Other Business Entity"**  
Into  
**Florida Limited Liability Company**

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

Name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:

LC  
(Enter Name of Other Business Entity)

"Other Business Entity" is a limited liability company  
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

Organized, formed or incorporated under the laws of New York  
(Enter state, or if a non-U.S. entity, the name of the country)

017  
(Enter last four digits of organization, formation or incorporation)

Name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:  
LC  
(Enter Name of Florida Limited Liability Company)

Effective on the date of filing, enter the effective date: \_\_\_\_\_.  
**Effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after  
this document is filed by the Florida Department of State.)**  
If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the  
effective date on the Department of State's records.

Conversion of conversion has been approved in accordance with all applicable statutes.

The converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to  
such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

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is 4th day of January 2023.

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative: Anthony Mancilla  
Name: Anthony Mancilla Title: Authorized Member

**Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]**

Signature: Anthony Mancilla  
Name: Anthony Mancilla Title: Managing Member

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

**Corporation:**

Signature of Chairman, Vice Chairman, Director, or Officer.  
If no Officers have not been selected, an Incorporator must sign.

**General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**Limited Partnership or Limited Liability Limited Partnership:**

Signature of ALL General Partners.

Signature of an authorized person.

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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TALLAHASSEE, FLORIDA

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Ynot M, 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:

2904 W San Nicholas St

Tampa, FL 33629

### Mailing Address:

2904 W San Nicholas St

Tampa, FL 33629

## 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:

Anthony Mancilla

Name

2904 W San Nicholas St

Florida street address (P.O. Box **NOT** acceptable)

Tampa

FL 33629

City

Zip

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*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..*

DocuSigned by:

Anthony Mancilla

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u>	<u>Name and Address:</u>
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Anthony Mancilla
	2904 W San Nicholas St
	Tampa, FL 33629

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

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REQUIRED SIGNATURE:

DocuSigned by:  
Anthony Mancilla  
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Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Anthony Mancilla  
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)