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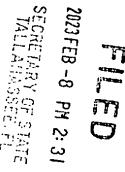
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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2023 JAN 31 PM 12: 45

COVER LETTER

Division of Co	orporations			
SUBJECT: LEN AND	CLO TRAVEL LLC			
зовянет	(Name of Res	ulting Florida Lim	ited Con	npany)
				d fees are submitted to convert an "Other coordance with s. 605,1045, F.S.
Please return all corre	espondence concerning	g this matter to:		
BERENICE IPIA-FELIC	CIANO			
	(Contact Person)		_	
PRATS FERNANDEZ	AND CO PA		-	
	(Firm/Company)			
999 PONCE DE LEON	BLVD. STE. 1110		_	
	(Address)			
CORAL GABLES, FL 3	33134			
(()	ity, State and Zip Code)		_	
ADMIN@PRATSFERN	IANDEZ.COM			
E-mail Address: (to be	e used for future annual re	port notifications)		
For further information	on concerning this ma	tter, please call:	•	
BERENICE IPIA-FELIC	CIANO	at (305) 444 8	8333
(Name of Conta	ct Person)	(Area Cod	e) (Day	time Telephone Number)
	or the following amou a bank located in the	•	process	sed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	■\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filin and Certified Co		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
Mailing Addi New Filing So Division of C P.O. Box 632 Tallahassee, F	ection orporations 7		New Divis The C	t Address: Filing Section ion of Corporations Jentre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

TO: New Filing Section



February 5, 2023

BERENICE IPIA-FELICIANO 999 PONCE DE LEON BLVD., STE 1110 CORAL GABLES, FL 33134 US

SUBJECT: LEN AND CLO TRAVEL LLC

Ref. Number: W23000013122

We have received your document for LEN AND CLO TRAVEL LLC. However, the document has not been filed and is being returned for the following:

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

If you have any further questions concerning your document, please call (850) 245-6052.

Letter Number: 423A00002748

Summer Chatham Regulatory Specialist II New Filing Section

www.sunbiz.org

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

2023 FEB -8 PH 2:31 SECRETARY OF STATE

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: LEN AND CLO TRAVEL LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (201103110453) (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)
01/31/2011
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:
LEN AND CLO TRAVEL 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 24th day of January	20_23	
Signature of Authorized Representative of Limi	ted Liability Company:	
Signature of Authorized Representative: Laon Printed Name Leonard EDELSTEIN	ard Calstein Title Member	
Signature(s) on behalf of Other Business Entity: [•
Signature: <u>Leonard (dalstein</u> Printed Name: <u>Leonard J Edelstein</u>		-
	Title: Member	-
Signature: Claudine Edelstein		SE 20
Signature: Claudine Edelstein	Title: Member	ZOZJFEB SECRETALLA TALLA
		स्ति हों
Signature:Printed Name	Title	- A-8
Printed Name.		
Signature:Printed Name:		_ 照 3
Printed Name:	_ Title;	- デン グ
		一点。
SignaturePrinted Name:	Title	- ' '
Plinted Name		•
Signature:Printed Name:		-
Printed Name:	Title	_
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	Officer corporator must sign,	
If Florida General Partnership or Limited Liability Signature of one General Partner		
If Florida Limited Partnership or Limited Liabilia Signatures of ALL General Partners.	ty Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25,00 \$125,00 \$30,00 (Optional) \$5,00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

LEN AND CLO TRAVE	L LLC	ability Company, "L.L.C.," or "LLC.")	
(Mist C	oman me watas Tantico La	ability Company, Bib.C., Or BBC.	
ARTICLE II - Addr	ess:	· · · · · · · · · · · · · · · · · · ·	ility Company is:
The mailing address a	and street address of th	ne principal office of the Limited Liab	inty Company is.
Principal Office Add	iress:	Mailing Address:	
4840 S CLASSICAL BI	_VD,	4840 S CLASSICAL BLVD.	
DELRAY BEACH, FL 3		DELRAY BEACH, FL 33445	
	orida street address of t	the registered agent are: CO., P.A. Vame	FEB -8 PH 2: 3 RETARY OF STATE LLAHASSEE, FL
0.0	00 DONCE DE LEON BI	LVD CTC 1110	$=$ ω
	99 PONCE DE LEON BL		3- 3-
I		(P.O. Box <u>NOT</u> acceptable)	31
I	Florida street address (31

(CONTINUED)

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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	LEONARD EDELSTEIN	
	4840 S CLASSICAL BLVD,	
	DELRAY BEACH, FL 33445	
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	7735	<u>လ</u> သ
	- F	$\frac{\omega}{2}$
(Use attachment if pecessary)		
(Use attachment if necessary) CLE V: Other provisions, if any. 7-4737349 REQUIRED SIGNATURE: Leonard Caleba	tain	

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)

COVER LETTER

TO:	New Filing Se Division of Co							
SHRI	ECT: LEN AND	O CLO TRAVEL LLC						
3013	EC1	(Name of Res	ulting Florida Limi	ted Com	pany)			
Busin	ess Entity" into	s of Conversion, Articl a "Florida Limited Li espondence concerning	ability Company	ion, and y" in ac	d fees are submitted to c ecordance with s. 605.10	convert an "0 045, F.S.	Other	
110050	. Totalli un com		,					
BERE	NICE IPIA-FELIC	CIANO		_				
		(Contact Person)				co contra	20	
PRAT	S FERNANDEZ	AND CO PA		_		TAL AL	23 F	
		(Firm/Company)				28	83	
999 P	ONCE DE LEON	I BLVD. STE. 1110				五方	8-	
		(Address)	<u>.</u>	_		200 000 000 000	70	Ġ
CORA	L GABLES, FL 3	33134				SECRETARY OF STATE	<u>∓</u>	5
	((City, State and Zip Code)		-		1.1.2.	 پن	
ADMI	N@PRATSFERN	IANDEZ.COM				<i>i</i> 13	10	
E-11	nail Address: (to b	e used for future annual rep	port notifications)	_				
For fu	rther information	on concerning this mat	tter, please call:					
BERE	NICE IPIA-FELIO	CIANO	at (305) 444 8	3333 time Telephone Number)			
	(Name of Conta	ct Person)	(Area Code) (Day	time Telephone Number)	_		
Enclo dollar	sed is a check fi s and drawn on	or the following amou a bank located in the	nt: (All checks) United States)	process	ed by this office must b	e payable ir	ı US	
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles anization)	■\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing and Certified Co	•	□\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
	Mailing Addi New Filing Se Division of C P.O. Box 632 Tallahassee, F	ection orporations 7		New I Divisi The C 2415 I	Address: Filing Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite hassee, FL 32303	810		

Articles of Conversion For "Other Business Entity"

Florida Limited Liability Company

2023 FEB -8 PM 2: 3: SECRETARY OF STAIL TALL AHASSEE. FL

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:

LEN AND CLO TRAVEL LLC

	(Enter Name of Other Business Entity)
2.	The "Other Business Entity" is a LLC (201103110453) (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.)
Fire	st organized, formed or incorporated under the laws of
	(Enter state, or if a non-U.S. entity, the name of the country)
on	01/31/2011
···	(date of organization, formation or incorporation)
3.	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
LEI	N AND CLO TRAVEL LLC
	(Enter Name of Florida Limited Liability Company)
4.	If not effective on the date of filing, enter the effective date:
(TI	ne 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.)
Not doc	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the unnent's effective date on the Department of State's records.
5. 7	The plan of conversion has been approved in accordance with all applicable statutes.
6. 1	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 24th day of January	20 23	
Signature of Authorized Representative of Limit	ted Liability Company:	
Signature of Authorized Representative: Leon Printed Name Leonard EDELSTEIN	ard Calistein Title: Member	_
Signature(s) on behalf of Other Business Entity:		
Signature: Leonard Calstein		-
Printed Name: Leonard J Edelstein		
Signature: Claudine Edelstein Printed Name: Claudine Edelstein		_
Printed Name: Claudine Edelstein	Title: Member	-
Signature:Printed Name:	Title	-
Printed Name:		•
Signature:		-
Signature:Printed Name:	Title:	-
Signature:Printed Name:	Title.	- - 40 -
		4m 23
Signature:Printed Name:		- ([] 1788 1788
Printed Name:	_ Title	- ≥ <u>-</u> 8
If Florida Corporation:		14 A
Signature of Chairman, Vice Chairman, Director, or C	Officer.	SEP P
If Directors or Officers have not been selected, an Inc	corporator must sign.	15 N
If Florida General Partnership or Limited Liabilit Signature of one General Partner	y Partnership:	147E
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:	
All others: Signature of an authorized person.		
<u>Fees</u> :		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is	y:	
LEN AND CLO TRAVEL 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 Liability Company	ris:
Principal Office Address:	Mailing Address:	
4840 S CLASSICAL BLVD, DELRAY BEACH, FL 33445	4840 S CLASSICAL BLVD, DELRAY BEACH, FL 33445	
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the PRATS FERNANDEZ & CO.	registered agent are:	•
Nam 999 PONCE DE LEON BLVI Florida street address (P.C	D. STE. 1110	
CORAL GABLES	O. Box NOT acceptable) FL 33134 Zip Zip	
City	Zip m 3	
liability company at the place designated i registered agent and agree to act in this capa statutes relating to the proper and complete	to accept service of process for the above stated lin in this certificate, I hereby accept the appointment acity. I further agree to comply with the provisions a performance of my duties, and I am familiar with egistered agent as provided for in Chapter 605, F.S.	as of all and

(CONTINUED)

ICLE V: Other provisions, if any.		
(Use attachment if necessary)		ATE
		(i),
		1887
		至
	DECRAY BEACH, FL 33445	
MGR	CLAUDINE EDELSTEIN 4840 S CLASSICAL BLVD.	
	DELRAY BEACH, FL 33445	
	4840 S CLASSICAL BLVD,	
"MGR" = Manager MGR	LEONARD EDELSTEIN	
<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	

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.

LEONARD EDELSTEIN

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)