L2300090472

	Requestor's Name)
	Address)
(Address)
(1	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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D. O'KEEFE FEB 2 8 2023



COVER LETTER

TO:	New Filing S Division of C				
SUBJ	FCT. Anne Me	enke Studios, LLC			
эс во			sulting Florida Limit	ed Con	npany)
					nd fees are submitted to convert an "Othe coordance with s. 605,1045, F.S.
Please	return all corr	espondence concernin	g this matter to:		
Anne A	Ackermann				
		(Contact Person)		•	
Anne f	Menke Studios L	LC			
		(Firm/Company)		-	
8297 5	SE Country Esta	tes Way			
		(Address)		-	
Jupiter	FL33458				
		City, State and Zip Code)		-	
angelil	ka@annemenke	•			
E-n	nail Address: (to b	oe used for future annual re	port notifications)	-	
For fu	rther informati	on concerning this ma	tter, please call:		
Angeli	ka Saint-Aignan		at (⁹¹⁷	3040	541
	(Name of Conta	ict Person)		(Day	ctime Telephone Number)
		for the following amou a bank located in the		rocess	sed by this office must be payable in 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 Cop		■\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C	ection Corporations		New : Divis	t Address: Filing Section ion of Corporations Centre of Tallahassee

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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.

(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Anne Menke Studios, LLC	
(Enter entity type. Example: corporation, limited partnership, general partn	ership, 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)
	tucked Articles of Organizations
on 05/14/2007 (date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company as set forth in the at Anne Menke Studios LLC	tached Articles of Organization:
3. The name of the Florida Limited Liability Company as set forth in the at	tached Articles of Organization:

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 27	day of	February	202	
Signature of Auth	orized Repre	sentative of I	<u>.imited Li:</u>	bility Company:
Signature of Author Printed Name:	rized Represe Anne Ackerma	ntative:() Acha Title	member
Signature(s) on bel	nalf of Other	Business Enti	<u>y:</u> [See be	low for required signature(s)
Signature:	a. ache			
Printed Name:	Anne Ackerma	חו	Title	member
Signature:Printed Name:			Title	
Printed Name:			Title	·
Signature:				
Printed Name:		<u>.</u>	Title	· · · · · · · · · · · · · · · · · · ·
Signature:Printed Name:			Title	
Signature:				
Printed Name:			Title	
If Florida Corpora Signature of Chairm If Directors or Offic	an, Vice Cha ers have not b	een selected, a	n Incorpora	tor must sign.
If Florida General Signature of one Ge		or Limited Li:	<u>ability Part</u>	nership:
If Florida Limited Signatures of ALL			<u>ıbility Limi</u>	ted Partnership:
All others: Signature of an auth	orized person			
Fees:				
Articles of (Fees for Flo Certified Co Certificate o	orida Articles opy:	of Organizatio	\$30.0	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADTICLELAND			
ARTICLE I - Name: The name of the Limited Liability Com	pany is:		
	,,		
Anne Menke Studios, LLC			
	ed Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:			
The mailing address and street address of	of the principal office of the Limite	d Liability Company	is:
Principal Office Address:	Mailing Address:		
3297 SE Country Estates Way			
Jupiter FL 33458			
ARTICLE III - Registered Agent, Reg The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address	own Registered Agent. You must designate an	ent's Signature: individual or another	
Anne Ackermann	•		
Anne Ackermanii	Name		
8297 SE Country Esta			
	ess (P.O. Box <u>NOT</u> acceptable)		
Jupiter ————————————————————————————————————	33458 FL		
City	Zip		
a. Ack	nated in this certificate, I hereby acc is capacity. I further agree to compl mplete performance of my duties, ar m as registered agent as provided fo	cept the appointment (ly with the provisions ad I am familiar with (as of ali and
	· · · · · · · · · · · · · · · · · · ·		
(CC	ONTINUED)	2023 FEB 28 AM ÄLLAHÄSSEELEI	
		5 65 65 65	,-

ARTICLE IV-

Anne Ackermann

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

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
AMBR	Anne Ackermann	
	8297 SE Country Estates Way	
	Jupiter FL 33458	
		
		
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(Use attachment if necessary)	⊑r (2023
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CLE V: Other provisions, if any,	SS:	œ
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DEALIDED SIGNATURE.	구	ည္
REQUIRED SIGNATURE:		
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<i>\(\ldot\)</i>	Vices	

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)