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PICK-UP	Mait Wait	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

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### COVER LETTER

TO: New Filing Section			
Division of Corporations			
SUBJECT: THE YOUNG U MONTESSOR	RI SCHOOL, LLC		
(Name of F	Resulting Florida Li	mited Company)	
The enclosed Articles of Conversion, Art Business Entity" into a "Florida Limited			
Please return all correspondence concern	ing this matter t	o:	
NICOLETTE GUDKNECHT, ESQ.			
(Contact Person)		- <del></del>	
DOROT & BENSIMON PL			
(Firm/Company)		-	
20295 NE 29TH PL STE 201			
(Address)			
AVENTURA. FL 33180			
(City, State and Zip Code	)		
CORPORATE@DORBENCO.COM			
E-mail Address: (to be used for future annual	report notifications	31	
For further information concerning this n	natter, please cal	I:	
NICOLETTE GUDKNECHT	at ( <sup>305</sup>	, 921-9421	
(Name of Contact Person)	(Area Co	de) (Daytime Telephone Number)	
Enclosed is a check for the following amodollars and drawn on a bank located in th			able in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  □ \$155.00 Filing Fees and Certificate of Status	□S180.00 Fil. and Certified (		
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	2023 :

## **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.

I. The name of the "Other Business Entity" immediately prior to the filing of the Articles of THE YOUNG U MONTESSORI SCHOOL INC.	f Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a CORPORATION  (Enter entity type. Example: corporation, limited partnership, general partnership, common lay	<del></del>
(Enter entity type. Example: corporation, limited partnership, general partnership, common lay	w or business trust, etc.)
FIORIDA First organized. formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, the nam	ie of the country)
3/9/2016	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles	of Organization:
THE YOUNG U MONTESSORI SCHOOL, 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 ca the date this document is filed by the Florida Department of State.)	dendar days after
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	I not be listed as the
5. The plan of conversion has been approved in accordance with all applicable statutes.	
<ol> <li>The "Converted or Other Business Entity" has agreed to pay any members having appraisal ri which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.</li> </ol>	ights the amount to
	202
	~

Signed this 22nd day of February	20_23
Signature of Authorized Representative of Lim	ited Liability-Company:
Standard Androise J.D. and Santing	
Signature of Authorized Representative: Printed Name: ALBERT FERNANDEZ	TO MANACED
Printed Name: ALBERT FERNANDEZ	Title: MANAGER
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature:	
Signature: Printed Name: AFBERT FERNANDEZ	Title: DIRECTOR/PRESIDENT
Signature.	
Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Ciam ton	
Signature:	Trial
Printed Name:	rine.
Signature:	
Signature:Printed Name:	Title
Timed Tame.	
<u>If Florida Corporation:</u>	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	
<u>If Florida General Partnership or Limited Liabili</u>	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	tv Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
A.D. al	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
<b>-</b>	
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

-∵ A∺II: 26

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compan	y is:
THE YOUNG U MONTESSORI SCHOOL, LLC	Diability Company, "L.L.C" or "LLC.")
ARTICLE II - Address:	ne principal office of the Limited Liability Company is:
The maining address and street address of the	the principal office of the Elimited Flatimity Company is.
Principal Office Address:	Mailing Address:
1505 NW 8TH AVE	999 NE 99TH ST
MIAMI, FL 33136	MIAMI SHORES, FL 33138
	ered Office, & Registered Agent's Signature: Registered Agent, You must designate an individual or another the registered agent are:
ALBERT FERNANDEZ	
7	same
999 NE 99TH ST	
Florida street address (	(P.O. Box <u>NOT</u> acceptable)
MIAMI SHORES	FL 33138
City	Zip
liability company at the place designate	nd to accept service of process for the above stated limited ed in this certificate. I hereby accept the appointment as apacity. I further agree to comply with the provisions of a

dШ 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 provided for in Chapter 605, F.S.,

Registered Agent's Signature (REQUIRED)

(CONTINUED)

#### ARTICLE IV-

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	ALBERT FERNANDEZ	
	999 NE 99TH ST	
	MIAMI SHORES, FL 33138	
MGR	LIZA FERNANDEZ	
	999 NE 99TH ST	
	MIAMI SHORES, FL 33138	
	-	
<del>`</del>		
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(Use attachment if necessary)		
(Ose attachment if necessary)		
CLE V: Other provisions, if any.		
Sist V. Other provisions, it any.		
	<del></del> ,	
DEARINED SIZE CTUDE.		
REQUIRED SIGNATURE:		

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.

ALBERT FERNANDEZ

Typed or printed name of signee

Filing Fees
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Feets
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)