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

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations			
Uplift Entities			
SUBJECT: (Name of Re	sulting Florida Lim	ited Company)	_
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited L	•		
Please return all correspondence concernir	ng this matter to:		
Jamesly Delhomme			
(Contact Person) Uplift Entities		_	
(Firm/Company) 4800 Solara Circle #4030		_	
(Address) Sanford, FL, 32771		_	
(City, State and Zip Code) Contracts@upliftentities.com		_	
E-mail Address: (to be used for future annual re	eport notifications)		
For further information concerning this ma	atter, please call:		
Jamesly Delhomme	617 at (319-0736)	
(Name of Contact Person)	(Area Code	e) (Daytime Telephone Number)	_
Enclosed is a check for the following amordollars and drawn on a bank located in the		processed by this office must	be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co		
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, Suit Tallahassee, FL 32303	te 810.

Articles of Conversion

For

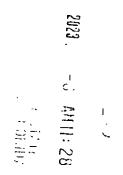
"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> 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: Uplift Entities
(Enter Name of Other Business Entity)
LLC
2. The "Other Business Entity" is a
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
First organized, formed or incorporated under the laws of
10/14/2020
on
on
Uplift Entities LLC (Enter Name of Florida Limited Liability Company)
(Enter Name of Plorida 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 $\frac{\partial 2}{\partial x}$ day of $\underline{\mathcal{M}}$	a/ch 20_23
Signature of Authorized Represe	ntative of Limited Liability Company:
Signature of Authorized Representa Printed Name: Jamesly Delhomme	Title Manager
Signature(s) on behalf of Other Bu	siness Entity: [See below for required signature(s)]
Signature: Scoth	
Printed Name Lidia Delhomme	Title: Member
Signature: \/	Title: Member
Printed Name: Vicki Cyriac	Title: Member
Printed Name:	Title:
Signature:	Title:
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairm	
If Florida General Partnership or Signature of one General Partner.	Limited Liability Partnership:
If Florida Limited Partnership or Signatures of ALL General Partners.	Limited Liability Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Fees for Florida Articles of Organization:

Certified Copy:

Certificate of Status:

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must contain the words "Limited Liability Company, "L.L.C.," or "L.C.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 250 W Lake Mary BLVD #3047 Sanford, FL, 32773 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:	ARTICLES OF ORGANIZATION FOR ARTICLE I - Name:	TEORIDA LIMITED LIAI	DILIT I COMPANI
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: 250 W Lake Mary BLVD #3047 Sanford, FL, 32773 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 Floridar registration.) The name and the Florida street address of the registered agent are: Jamesty Delhomme Name 4800 Solara Circle #4030 Florida street address (P.O. Box NOT acceptable) Sanford FL Zip 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. (CONTINUED) (CONTINUED)	The name of the Limited Liability Company	vis:	
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- C	CONT	riniied)	2023
	(CON)	I HNUED)	. .
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ARTICLE IV-

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

"MGR" = Manager			
MGR	Jamesly Delhomme		
	4800 Solara Circle #4030, Sanford, FL. 32771		
AMBR	Lidia Delhomme		
	4800 Solara Circle #4030, Sanford, FL		
	32771		
AMBR	Vicki Cyriac		
	93 Brook Rd, Milton, MA, 02186		
// · · · · · · · · · · · · · · · · · ·			
(Use attachment if necessary)			
LE V: Other provisions, if any,			

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.

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)

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

Uplift Entities, LLC, a limited liability company duly organized under the laws of the State of South Carolina on October 14th, 2020, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date selection.

Given under my Hand and the Great Seal of the State of South Carolina this 1st day of March, 2023.

Mark Hammond, Secretary of State