# L23 000143048

(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:
Conscion

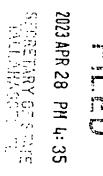
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**D CUSHING** 

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### **COVER LETTER**

<ul> <li>Division of C</li> </ul>	orporations					
SUBJECT:	All Riz (Name of Res	eulting Florida Linnied Cor	C npany)	_		
		<del>-</del>	nd fees are submitted to ecordance with s. 605.			Other
Please return all corr	espondence concerning	g this matter to:				
	(Contact Person)  (IZR INC (Firm/Company)  (Address)  (Address)  (Address)  (Aty, State and Zip Code)  (AWCERS ON	Dallaizein		CEORETA TALL AL	2023 APR 2	2
•	on concerning this ma  ONDERSON	tter, please call: _at (	175-2532 ytime Telephone Number)	14 JSSV 3143 JOAN	8 PH 4: 35	O
Enclosed is a check t			sed by this office must	be paya	able ir	ı US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
Mailing Add New Filing S Division of C P.O. Box 632	ection Corporations	New Divis	Filing Section Filing Corporations Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

TO: New Filing Section



November 7, 2022

SHERISSEE MITCHELL ANDERSON ALL RIZE INC 11290 RILEY PINES CIRCLE GIBSONTON, FL 33534

SUBJECT: ALL RIZE INC Ref. Number: P22000050144

We have received your document for ALL RIZE INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Are you trying to change this corporation to a LLC? If you are you have completed the wrong form. Please see the attached form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 822A00024983



December 20, 2022

SHERISSEE MITCHELL ANDERSON ALL RIZE INC 11290 RILEY PINES CIRCLE GIBSONTON, FL 33534

SUBJECT: ALL RIZE INC Ref. Number: P22000050144

We have received your document for ALL RIZE INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

The Filing Fee to file the conversion is \$150.00 so we will need an additional \$115.00 if you are changing from an Inc to a LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senio Section Administrator

ä

Letter Number: 022A00028351



January 25, 2023

SHERISSEE MITCHELL ANDERSON ALL RIZE INC 11290 RILEY PINES CIRCLE GIBSONTON, FL 33534

SUBJECT: ALL RIZE INC Ref. Number: P22000050144

We have received your document for ALL RIZE INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$115.00.

Proper titles for management for a LLC is either Manager or Authorized Member. Which do you want me to list yourself and Charviel as? 1/55/F AFKO NICCO Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 223A00001829

# Articles of Conversion For Other Business Entity'

# "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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of Floridge (Enter state, or if a non-U.S. entity, the name of the country)
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:
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 7/25/2023.  (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.

Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:	Title: OWNER
Signature(s) on behalf of Other Business Entity: [	See below for required signature
Simonia ( Nota appl	
Signature: ( Macgall Printed Name: havis J. +chi/	Title: VICE PR.S. dea
, , , , , , , , , , , , , , , , , , ,	
Signature:Printed Name:	Title:
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Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc If Florida General Partnership or Limited Liability Signature of one General Partner.	corporator must sign.
	ty Limited Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	(Y Elimete Turneron p.
Signatures of <u>ALL</u> General Partners. <u>All others:</u>	(Y Edimed T de time tomp)
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.  All others: Signature of an authorized person.  Fees:	(Y Edimeted T at the Comp.)
Signatures of ALL General Partners.  All others: Signature of an authorized person.  Fees:  Articles of Conversion:	\$25.00
Signatures of <u>ALL</u> General Partners. <u>All others:</u> Signature of an authorized person. <u>Fees:</u>	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
(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:  Mailing Address:
F270 Woodland Center Barbard F270 Woodland Center Borker Tomps, F18 33614 Tomps, F18 33614
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:    Shehisse   Gudensod   Name

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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  OWHEN   Ambar	Chenissee anderson
OGHEK HAR	11250 WEV PRIES CIACR
	C.D. ONHEW FIG 3353U
.1.	
Vice President	_ Changel Mitchell
	_ JEHNEN, MC 3.) SEY
100 C-l	Chamberlin Challed
	120 Chadsworth ave
	SEFFNER, FIC 335FY
(Use attachment if necessary)	
•	
CLE V: Other provisions, if any.	
<b>REQUIRED SIGNATURE:</b>	
$Q = I_{\bullet}$	0.0
J Grace	
Signature of a member or	an authorized representative of a member
This document is executed in accordance	e with section 605,0203 (1) (b), Florida Statutes. I am aware tha
any false information submitted in a docu	iment to the Department of State constitutes a third degree felor
as accorded for in a 017 155 E C	•
as provided for in s.817.155, F.S.	_
as provided for in s.817.155, F.S.	_
as provided for in s.817.155, F.S.	yped or printed name of signee Filing Fees

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