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(Re	questor's Name)
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bA)	dress)	<u> </u>
(Ćit	y/State/Zip/Phor	ne #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Na	ime)
(Do	cument Number	r)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO:	New Filing : Division of	Section Corporations						
SUBJ	ECT: Right H	andy Man LLC						
5000			esulting Florida	Limited Co	ompany)	_		
The er Busine	nclosed Article ess Entity" int	es of Conversion, Artico o a "Florida Limited L	cles of Organ Liability Com	ization, a pany" in	and fees are submitted to accordance with s. 605.1	convert 045, F.	an "(S.	Other
Please	return all con	respondence concernit	ng this matter	to:				
Marlon	Miller							
Right F	landy Man Inc.	(Contact Person)						
315 SV	V 43rd Ter	(Firm/Company)						
- ····		(Address)	· · · · · · · · · · · · · · · · · · ·					
Gaines	ville, FL 32607	_						
dearzai	(inmiller@gmail	City, State and Zip Code) com		 ,				
E-ma	ail Address: (to b	e used for future annual re	port notification	ıs)				
For fur	ther informati	on concerning this ma	tter, please ca	ıll:				
Marlon	Miller		_at (<u>352</u>	₎ 443-	8605			
	(Name of Conta	ct Person)		ode) (Da	ytime Telephone Number)	=		
Enclose dollars	ed is a check f and drawn on	or the following amou a bank located in the	int: (All check United States	ks proces)	sed by this office must b	e payabl	le in I	JS
(\$25 for	.00 Filing Fees Conversion for Articles ization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Fi and Certified		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
	Mailing Addi New Filing So Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7		New Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite	SECRETARY OF S	2023 MAR -9 PM	

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.

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.

2023 MAR -9 PM 7:59
SECRETARY OF STATE
TALLAHASSES TE

Signed this 1th day of April	<u>20</u> 23 <u>.</u>	
Signature of Authorized Representative of Lir		
Signatura (S.A. d.) 13		
Signature of Authorized Representative: 12 Printed Name: Marlon Miller		
Times tame. Jotest Jones	little: Owner	-
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]	
Signature:		
Printed Name: Marlow Miller	Title: OWNER	-
Signature: Printed Name:		
Printed Name:	Title:	-
Signature:Printed Name:	Title	-
Signature:		
Signature:Printed Name:	Title:	
Signature:Printed Name:		
Timiled Name.	Title:	
Signature:		
Signature: Printed Name:	Title	
If Florida Corporation:		
Signature of Chairman, Vice Chairman, Director, or	Officer.	
If Directors or Officers have not been selected, an Ir	corporator must sign.	
If Florida General Partnership or Limited Liabil	San Duna Lit	
Signature of one General Partner.	ity Partnership:	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:	
Signatures of ALL General Partners.		
All others:		
Signature of an authorized person.		
British of all additional person.		
Fees:		
		€.
Articles of Conversion:	\$25.00	77.C
Fees for Florida Articles of Organization:	\$125.00	77
Certified Copy:	\$30.00 (Optional)	<u>, </u>
Certificate of Status:	\$5.00 (Optional)	

2023 HAR -9 PM 7:59 SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the	Name: he Limited Liability Compan	v ic:	
	ie Emined Elability Compan	y is.	
Right Handy Ma	an LLC		
	· · · · · · · · · · · · · · · · · · ·	iability Company, "L.L.C.," or "LLC.")
ARTICLE II	A did mana.		
		ne principal office of the Limi	ted Lighility Commons is
	and street address of h	te principal office of the Ellin	ned Liability Company is:
Principal Offi	ce Address:	Mailing Address:	
315 SW 43rd To	er	315 SW 43rd Ter	
Gainesville, FL	32607	Gainesville, FL 32607	
			
business entity wit	ity Company cannot serve as its own F h an active Florida registration.) the Florida street address of t	ered Office, & Registered A Registered Agent. You must designate a the registered agent are:	n individual or another
	Marion Miller		
		ame	
	215 024 40 47		
	315 SW 43rd Ter Florida street address (P.O. Box NOT acceptable)	
		 ; ,	
	Gainesville	FL ³²⁶⁰⁷	
	City	Zip	
registered ag statutes rela	ompany at the place designate ent and agree to act in this ca uting to the proper and comple	nd to accept service of processed in this certificate, I hereby a pacity. I further agree to compete performance of my duties, as registered agent as provided	sccept the appointment as ply with the provisions of all and I am familiar with and

A	\mathbf{R}^{γ}	П	C	I.F	1	V-

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

HARZEDEN A	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	
MGR	Marlon Miller
	315 SW 43rd Ter
	Gainesville FL 32607
<u> </u>	
(Use attachment if necessary)	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	SECRI TAL
	RETA
	RETAL ALLA
	RETARY O
REQUIRED SIGNATURE:	SECRETARY OF STALLAHASSEE
REQUIRED SIGNATURE:	RETARY OF ST LLAHASSEE. H
Signature of a member or at This document is executed in accordance wany false information submitted in a document as provided for in a \$17,155, E.S.	n authorized representative of a member in the section 605.0203 (1) (b), Florida Statutes. I am aware the ent to the Department of State constitutes a third degree felo
Signature of a member or at This document is executed in accordance wany false information submitted in a document as provided for in a \$17,155, E.S.	n authorized representative of a member in the section 605.0203 (1) (b), Florida Statutes. I am aware the ent to the Department of State constitutes a third degree felo
Signature of a member or at This document is executed in accordance wany false information submitted in a document as provided for in a \$17,155, E.S.	n authorized representative of a member E