L23000187402

(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:
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Office Use Only

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A CALLANCY OF STATE

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COVER LETTER

Division of C	orporations				
SUBJECT: Precious	Pups Walking Service I	LLC			
		sulting Florida Lin	nited Cor	mpany)	_
		-		nd fees are submitted to accordance with s. 605.	
Please return all corr	espondence concernin	g this matter to):		
Lisa Kelly					
	(Contact Person)				
	(Firm/Company)	·			
8736 SE 158th St					
	(Address)				
Summerfield, FL 3449	31				: 202
((City, State and Zip Code)				Z: = T
lisakelly0210@gmail.c	om				1 3 3 mm
E-mail Address: (to b	e used for future annual re	port notifications)		107 17
For further informati	on concerning this ma	tter, please call	l:		2023 HAR 27 MM 1: 29 2013 HAR 27 MM 1: 29 2014 HAR 27 MM 1: 29
Lisa Kelly		_at (<u></u>	, 205-	1471	E, FI
(Name of Conta	ict Person)	(Area Coo	le) (Da	ytime Telephone Number)	- Far 5
	or the following amou a bank located in the		proces	sed 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 Filiand Certified C	_	□\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
<u>Mailing Add</u> New Filing S				t Address: Filing Section	
Division of C				ion of Corporations	
P.O. Box 632			The C	Jentre of Tallahassee	
Tallahassee, l	FL 32314		2415	N. Monroe Street, Suit	e 810

Tallahassee, FL 32303

TO: New Filing Section

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.

. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
Precious Pups Walking Service Inc (Enter Name of Other Business Entity)
. The "Other Business Entity" is a Corporation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
irst organized, formed or incorporated under the laws of
10/12/22
(date of organization, formation or incorporation) The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization;
. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization;
Precious Puns Walking Service LLC
(Enter Name of Florida Limited Liability Company)
. 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.) Out: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the occument's effective date on the Department of State's records.
. 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.

\$30.00 (Optional)

\$5.00 (Optional)

Certified Copy:

Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Valking Service LLC (Must contain the words "Limited"	Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - The mailing add		the principal office of the Limited	I Liability Compar	ny is:
Principal Offic	ee Address:	Mailing Address:		
8736 SE 158th S	ξ ι	8736 SE 158th St		
Summerfield, FL	·	Summerfield, FL 34491		
The name and the	he Florida street address of Lisa Kelly	f the registered agent are: Name	TALLAHASSEE,	
			A V C	
	8736 SE 158th St	(I) () I) N/ATI	器 III (平 ST SSEE, F	
		(P.O. Box NOT acceptable)	<u> </u>	
	r torida street address			
	Summerfield	FL 34491	29 FL	
		FL 34491 Zip	LATE 19	

(CONTINUED)

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Lisa Kelly
	8736 SE 158th St
	Summerfield, FL 34491
(Use attachment if necessary)	
(Ose attachment if necessary)	71 /
	TALLAH
LE V: Other provisions, if any.	A U
	ASS ASS
	O N
DEALIDED CLANATURE	골골
REQUIRED SIGNATURE:	m m
Zisa Kelle	
	À
Signature of a member or an	authorized representative of a member
This document is executed in accordance wi	th section 605.0203 (1) (b). Florida Statutes, I am aware that to the Department of State constitutes a third degree fel
Lisa Kelly	
Type	d or printed name of signee

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