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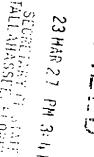
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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FILED

# **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: PUSh Purpose LLC (Name of Resulting Florid	a Limited Company)
The enclosed Articles of Conversion, Articles of Orga Business Entity" into a "Florida Limited Liability Con	mization, and fees are submitted to convert an "Other npany" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter	er to:
Contact Person)  PUSU PUNIOSE  (Firm/Company)  S342 CLUV K RA # 307  (Address)  (City. State and Zip Code)  INFO MEN PUNIOSE. CIW  E-mail Address: (to be used for future annual report notificate  For further information concerning this matter, please  (Name of Contact Person)  A contact Person)  A contact Person	
Enclosed is a check for the following amount: (All chedollars and drawn on a bank located in the United State	ecks processed by this office must be payable in US
\$\sum \\$150.00 \text{ Filing Fees}  \text{S155.00 Filing Fees}  \text{and Certificate of}  \text{and Certificate of}  \text{S125 for Articles}  \text{Status}  \text{Status}	Filing Fees ed Copy Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

# **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 Artic	cles of Co	nversio	on is:
(Enter Name of Other Business Entity)			
2. The "Other Business Entity" is a	on law or b	usiness	trust, etc.)
First organized, formed or incorporated under the laws of	ne name of t	he coun	
on 315122 (date of organization, formation or incorporation)	SE TAL	23 HAR	- <b>77</b>
3. The name of the Florida Limited Liability Company as set forth in the attached Ar			zation:
Push Purdose, UC	SET OF	7 PM	m
(Enter Name of Florida Limited Liability Company)	- î, >:-	ညှ	
4. If not effective on the date of filing, enter the effective date:	3.5	<del>-</del>	
(The effective date: Cannot be prior to date of receipt or filed date nor more than 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 dadocument'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.

 <del></del> -	 

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

ARTICLE IV-

"MGR" = Manager

"AMBR" = Authorized Member

Company:

Title:

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 my talse information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

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

Name and Address:

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)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

(Company, "L.L.C.," or "LLC.")
incipal office of the Limited Liability Company is:
Mailing Address:
5342 Marked #3017 Savasofa PL 34233
Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
egistered agent are:
DAT ES N
Rd # 2017
Box NOT acceptable) $\mathbb{R}^{3/2}$ $\mathbb{R}^{3/2}$
The Syldon To a Co
accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S

(CONTINUED)

Signed this AUTH day of AMV	20_23	
Signature of Authorized Representative	of Limited Liability Company	<u>:</u>
Signature of Authorized Representative:  Printed Name: \$144 11100 +10.4	Title: DIVILTOY	Amer_
Signature(s) on behalf of Other Business E	Intity:  See below for required :	signature(s)
Signature: X 13 M		
Signature: Stand Name: Stand N	Title: MYNLY	
Signature: Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:		
Printed Name:	Title;	
Signature:		
Printed Name:	Title:	
Signature:		23 SEC ALL
Signature: Printed Name:	Title:	ARE MA
If Florida Corporation:		R 2 1778 1888
Signature of Chairman, Vice Chairman, Direct	ctor or Officer	7 × 7
If Directors or Officers have not been selected	d an Incorporator must sign	PA
	o, an incorporator mast sign.	· · · · · · · · · · · · · · · · · · ·
<u>If Florida General Partnership or Limited</u>	Liability Partnership	
Signature of one General Partner.		·
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	Liability Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		

\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Articles of Conversion:

Certified Copy: Certificate of Status:

Fees for Florida Articles of Organization: