L23000218016

(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:

Office Use Only



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12023 APR 12 AH 4: 414



COVER LETTER

TO: New Filing Division of	Section Corporations							
SUBJECT: FIRST.	AMERICAN NATIONAL (CAPIT	AL, LLC					
SODJECT.			; Florida Limit	ed Cor	npany)	_		
The enclosed Articl Business Entity" int	es of Conversion, Artic o a "Florida Limited L	oles of	f Organizatio ty Company	on, ar " in a	nd fees are submitted to coordance with s. 605.	o convert a 1045, F.S	an "Otl	her
Please return all cor	respondence concernin	g this	matter to:					
Paul Sorbera								
	(Contact Person)							
	(Firm/Company)							
140 Island Way, Unit	324							
	(Address)					-1 b	2023	
Clearwater, Florida 33	3767					FA	APR	
((City, State and Zip Code)					子	12	[
jennifersorbera@gma	il.com					ASS C	722	
E-mail Address: (to	be used for future annual re	port no	otifications)			Y LLAHASSEE, FL	2023 APR 12 AH 4: 414	
For further informat	ion concerning this ma	tter, p	lease call:			FA	=	
Chad L. Gates, Esq.			941	366-8	3010	لد	i	
(Name of Cont	act Person)	ai (_	(Area Code)	(Day	ord by this afficient			
	for the following amount a bank located in the	mt. (<i>P</i>	vii checks pr	ocess	sed by this office must	be payabl	e in U	S
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status		180.00 Filing F 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		ī 1	New F Divisi	Address: Filing Section on of Corporations entre 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 Article FIRST AMERICAN NATIONAL CAPITAL CORP.	s of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Corporation (Enter entity type. Example: corporation, limited partnership, general partnership, common	n law or business trust, etc.
First organized, formed or incorporated under the laws of	
December 23, 1991 on	2022
(date of organization, formation or incorporation)	F 11 2023 APR
3. The name of the Florida Limited Liability Company as set forth in the attached Artic	
FIRST AMERICAN NATIONAL CAPITAL, LLC	SSE SE
(Enter Name of Florida Limited Liability Company)	M WWW.
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 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 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.	,
 The "Converted or Other Business Entity" has agreed to pay any members having appraisa which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. 	l rights the amount to

Signed this 4th day of April	20_23		
Signature of Authorized Representative	ve of Limited Liability Company:		
Signature of Authorized Representative: Printed Name: Paul Sorbera	Title: AMBR		
Signature(s) on behalf of Other Business	s Entity: [See below for required signature(s)]		
Signature: Al Marie: Paul Sorbera	Title: President	_	
Timed Name, and Colored			
Printed Name:	Title:		
Printed Name:	Title:	_	
Signature: Printed Name:	Title:	_ _	
Signature:Printed Name:	Title:		
		~3	
Printed Name:	Title:	12023 APR	,
If Florida Corporation: Signature of Chairman, Vice Chairman, Di	rector, or Officer.	12/2/27/27/27/27/27/27/27/27/27/27/27/27/	
If Directors or Officers have not been selec	eted, an Incorporator must sign.	SEE	
If Florida General Partnership or Limite Signature of one General Partner.	ed Liability Partnership:	AH 4: 44 CT STATE SSEE, FL	-
If Florida Limited Partnership or Limite Signatures of <u>ALL</u> General Partners.	ed 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:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compan	ıy is:			
FIRST AMERICAN NATIONAL CAPITAL, LLC (Must contain the words "Limited L	iability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address:				
The mailing address and street address of the	he principal office of the Limited	Liability Co	ompan	ıy is:
Principal Office Address:	Mailing Address:			
140 Island Way, Unit 324	140 Island Way, Unit 324			
Clearwater, Florida 33767	Clearwater, Florida 33767			
2070 Ringling Blvd.	Registered Agent. You must designate an inc	dividual or another TVLLAHASSEE, FL	E 12023 APR 12 AM 4: 44	
City	FL ³⁴²³⁷ Zip	rri	+	
Having been named as registered agent as liability company at the place designate registered agent and agree to act in this cast statutes relating to the proper and complaceept the obligations of my position as	nd to accept service of process for ed in this certificate, I hereby acce pacity. I further agree to comply lete performance of my duties, and	pt the appoi with the pro Tam familia	ntment vision: ur with	t as s of all i and

(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	B
AMBR	Paul Sorbera
	140 Island Way, Unit 324
	Clearwater, Florida 33767
AMBR	Jennifer Sorbera
	140 Island Way, Unit 324
	Clearwater, Florida 33767
	2
	2023
(Use attachment if necessary)	70 =
(Ose attachment if fiecessary)	OF STATE
	10 C = 1
LE V: Other provisions, if any.	TAT #
	l ₁₁ ,
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE.	1.1 4
	MI M/Le-
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
as provided for in s.817.155, F.S.	ment to the Department of State constitutes a third degree felon
Paul Sorbera	
l v	med or printed name of signee

Typed or printed name of signed

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)