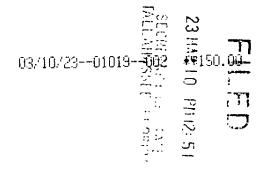
# 

(₭€	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
ı		
		1
W2300004	4542	
M012000 1	<u> </u>	







W V

# **COVER LETTER**

Division of C	Corporations			
SUBJECT:	Lavender	SRQ	LLC	
	(Name of Re	sulting Florida Limite	ed Company)	
			on, and fees are submitted to in accordance with s. 605.	
	espondence concernin	_		
Jenni	Fer Garz  (Contact Person)  der SRQ  (Firm/Company)  Vrning Tide  (Address)	-ia		
Laveno	der SRQ	LLC		
3715 -	(Firm/Company)	c Titalici	_	
3713 /	(Address)	STERRACE	•	
Ben	OENTON, FL City, State and Zip Code)	34208		CLARASSI BURLAND BURLAND
.)n 99	rzia & outloe e used for future annual re	ok.com		
E-mail Address: (to b	be used for future annual re	port notifications)		FH12: 5
For further informati	on concerning this ma	tter, please call:		
Jennife (Name of Conta	er barzia	_at ( <u>484</u> )	SS7 -856 (Daytime Telephone Number)	<u>; ;; =</u>
Enclosed is a check t		nt: (All checks pr	ocessed by this office must	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Pees and Certificate of Status	☐\$189.00 Filing F and Certified Copy		
<u>Mailing Add</u> New Filing S			Street Address: New Filing Section	
Division of C	orporations	· · · · · · · · · · · · · · · · · · ·		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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.

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 Wee MZ1 000006650  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or husiness trust, etc.)
First organized, formed or incorporated under the laws of
on 6/02/2/ (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:  (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 fisted 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.

Signed this <u>al</u> day of <u>feb.</u>	20_ <i>23</i>		
Signature of Authorized Representative of Lin	nited Liability Company:		
Signature of Authorized Representative: Jennier Name: Jennier N. Garrata	Title: How owners		
Signature(s) on behalf of Other Business Entity:	•		
Signature: Jesufu Home Printed Nanc: Jennifus N Gravia	Title: OWNER.		
Signature:Printed Name:	Title:		
Signature:Printed Name:	Title:	740 <b>2</b>	
Signature:Printed Name:	Title:	23 HAR I	جيون حدم د ر
Signature:Printed Name:	Title:	10 PM 2:5	; ; ;
Signature:Printed Name:	Title:	2:51	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In  If Florida General Partnership or Limited Liabili Signature of one General Partner.  If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.  All others:	Officer. secorporator must sign. sity Partnership:		
Signature of an authorized person.			

Fees:

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

\$125.00

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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Lavender SRG	R LLC
(Must contain the words "Limited Liability	(Company, "L.L.C.," or "L.L.C.")
	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3715 TURNING TIDES TEXAGE	3715 TURNING TIDES TERRALE
3715 TURNING TIDES TEXAGE BRADENTUL, FL 34208	3715 TURNING TIDES TERMALE BRADENTON, FL 34208
	\$ 10 N

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual of another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

ARTICLE 1 - Name:

JENNIFER N. GALZÍA

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

37/5 TUNING FIRE TERRACE
Florida street address (P.O. Box NOT acceptable)

City FL 34208

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.,

(CONTINUED)

Α	IJΠ	ľÌ	C	L	١١:	٧.
- * 1	N		N., I	Lati	. 1 '	• -

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 OWNER / MA	Jennifer GARZIA 3715 Turning Tides Terri Bradentin Fl. 34208
	23 ALLU
(Use attachment if necessary)	LAHAR 10
ARTICLE V: Other provisions, if any,	PH12:
	<u> </u>

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

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)