

L23000292679

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

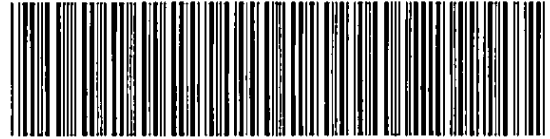
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W23000079428

Office Use Only



600408950586

05/17/23--01015--011 \*\*150.00

23 MAY 17 PM 9:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 6, 2023

KIMBERLY WATSON SEWELL  
5410 E CO HWY 30A STE 201  
SEAGROVE BEACH, FL 32459 US

SUBJECT: MAZY PROPERTIES, LLC  
Ref. Number: W23000079428

We have received your document for MAZY PROPERTIES, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

An individual must sign on behalf of the business entity you have designated as the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

ARCEDRA JOHNSON  
Regulatory Specialist II

Letter Number: 023A00012850

23 MAY 17 PM 9:17  
RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Mazy Properties, LLC

(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Kimberly Watson Sewell

(Contact Person)

Watson Sewell, PL

(Firm/Company)

5410 E Co Hwy 30A Suite 201

(Address)

Seagrove Beach, FL 32459

(City, State and Zip Code)

dawn@watsonsewell.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Dawn Medina

at (850) 231-3465

(Name of Contact Person)

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in dollars and drawn on a bank located in the United States)

☒ \$150.00 Filing Fees  
(\$25 for Conversion  
& \$125 for Articles  
of Organization)

☐ \$155.00 Filing Fees  
and Certificate of  
Status

☐ \$180.00 Filing Fees  
and Certified Copy

☐ \$185.00 Filing Fees.  
Certified Copy, and  
Certificate of Status

**Mailing Address:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

New Filing Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

23 MAY 17 PM 9:07  
RECEIVED  
TALLAHASSEE  
FL 32303

FILED

**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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  
Mazy Properties, LLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a Limited liability company  
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of Alabama  
(Enter state, or if a non-U.S. entity, the name of the country)

on November 15, 2019  
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:  
Mazy Properties, LLC

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: Date of Filing

**(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 listed 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.

FILED  
MAY 17 9:17  
CLERK OF THE COURT  
JULIA H. HARRIS  
CLERK OF THE COURT

Signed this 15th day of May 20 23

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative: Mazy Holiday  
Printed Name: Mazy Holiday Title: Manager

**Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]**

Signature: Mazy Holiday  
Printed Name: Mazy Holiday Title: Manager of

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: Mazy Properties, LLC, an

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: Alabama limited liability

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: company

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**If Florida Corporation:**

Signature of Chairman, Vice Chairman, Director, or Officer.  
If Directors or Officers have not been selected, an Incorporator must sign.

**If Florida General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**All others:**

Signature of an authorized person.

**Fees:**

Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

FILED  
23 MAY 17 PM 9:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Mazy Properties, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

#### Principal Office Address:

300 Duck Key, Unit #3

Duck Key, FL 33050

#### Mailing Address:

3344 Peachtree Rd NE Unit 3602

Atlanta, GA 30326

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

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

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

Mazy Holiday

Name

300 Duck Key, Unit #3

Florida street address (P.O. Box **NOT** acceptable)

Duck Key

FL

33050

City

Zip

*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..*

DocuSigned by:

Mazy Holiday

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED  
23 MAY 17 PM  
SECRETARY OF  
TALLAHASSEE

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MANAGER

**Name and Address:**

Mazy Holiday

3344 Peachtree Rd, NE, Unit 3602

Atlanta, GA 30326

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Other provisions, if any.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REQUIRED SIGNATURE:**

DocuSigned by:

Mazy Holiday

30781C3CE429485

**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.

Mazy Holiday

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)**

23 MAY 17 7M 13:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED