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(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
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#### **COVER LETTER**

TO:	New Filing S Division of C					
SUBJ	ECT:	AlleanzaPo				
		(Name of Re	sulting Florida Limited C	ompany)	_	
The er Busing	nclosed Article ess Entity" into	es of Conversion, Artic o a "Florida Limited L	cles of Organization, liability Company" in	and fees are submitted to accordance with s. 605.	convert an "Othe 1045, F.S.	er
Please	return all corr	espondence concerning	ig this matter to:			
	John Fr	ank				
	Alleunz	(Contact Person)  a Partners  (Firm/Company)  Britain A	lle			
17	89 New	Britain A	venue			
		(Address)  Oity. State and Zip Code)				
<u> </u>	Muke 1	City. State and Zip Code)  MEMZAPA  e used for future annual re	rthers. com			
		on concerning this ma				
1	,	ct Person)	_ar(860)3	06-0460		
J	(Name of Conta	et Person)		aytime Telephone Number)	_	
Enclose dollars	ed is a check fo and drawn on	or the fotlowing amou a bank located in the	nt: (All checks proce United States)	ssed by this office must b	pe payable in US	
\$25 tor	.00 Filing Fees Conversion or Articles ization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	☐S185.00 Filing Fees, Certified Copy, and Certificate of Status	2023 JUN 12	
	Mailing Addr New Filing Se Division of Co P.O. Box 6327 Tallahassec, F	ection Orporations 7	New Divis The 2415	et Address: Filing Section sion of Corporations Centre of Tallahassee N. Monroe Street, Suite hassee, FL 32303	AHII: 06 SSEE, FL SO	

### **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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Witch Differ Ship (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
on April 26, 2012  (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  Means Physics LLC  (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: JUM   2023  (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.

Signed this 2nd day of June	20 20 23	
Signature of Authorized Representati		
Signature of Authorized Representative: Printed Name: John P. Fish	Title:	
Signature(s) on behalf of Other Busines	ss Entity:  See below for required signature	e(s)
Signature:	Tr. Title: CEO	
rimed Name: John ( Frank	dr_Title:Total	<del></del> -
Signature:		
Printed Name:	Title:	<del></del>
Printed Name:	Title:	<del></del> _
Printed Name:	Title:	<del></del>
Printed Name:	Title:	
Signature:Printed Name-	Title:	<del></del>
. miled ivalife.	IHIC:	
If Florida Corporation:		
Signature of Chairman, Vice Chairman, Di If Directors or Officers have not been selec	rector, or Officer.	
If Florida General Partnership or Limite Signature of one General Partner.	ed Liability Partnership:	
organization of the General Partner.		
If Florida Limited Partnership or Limite	ed Liability Limited Partnership:	
Signatures of ALL General Partners.		
All others:		SECTION AND COLOR
Signature of an authorized person.		
<del>Fccs:</del>		ANS
		OF ST
Articles of Conversion:	\$25.00	

\$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:		
Alleanza Partners 1	-L-C	
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
4488 North Ocean Shore Blvd Palm Coast, FL 32137	5 ame	<del></del>
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agented Agented Agent. You must designate an inc	et's Signature: dividual or another
The name and the Florida street address of the re-	gistered agent are:	
Charles De Manne		
102 Yacht Club Dri	ve, Unit 80	
Florida street address (P.O. I	Box NOT acceptable)	
Dalya Court	FL 32137	
City	Zip	
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as registered.	nis certificate, I hereby accept. I further agree to comply versions of my duties, and tered agent as provided for it	ot the appointment as with the provisions of all  Lan famili
Charles &	Martin	12 12
Registered Agent's Signatu		AHII: 06
(CONTINUE	ים'	<u></u>

#### ARTICLE IV-

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

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	John Frank
	Palm Coast, FL 32137
(Use attachment if necessary)	
LE V: Other provisions, if any.	
	<u> </u>
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	2023 NO. 2023
Signature of a member or a This document is executed in accordance any false information submitted in a document	nent to the Department of State constitutes a third degree felon
Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155. F.S.	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, I am aware that ment to the Department of State constitutes a third degree ferom ped 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)