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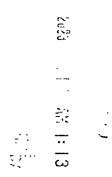
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(Re	questor's Name)
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(Cit	y/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(811)	siness Entity Name)
(Du	siness Chitty Marrie)
(Do	cument Number)
Certified Copies	Certificates of Status
Special Instructions to f	Filing Officer
	ming civicon.
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Office Use Only



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March 7, 2023

FORREST STANLEY 3203 W PALMETTO ST TAMPA, FL 33607 US

SUBJECT: YBOR TWO INVESTMENTS, INC.

Ref. Number: W23000031180

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

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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

KAIN COSTELLO Regulatory Specialist II New Filing Section

Letter Number: 623A00005267

3/17/23

2023 ... 17 AP 1: 14

COVER LETTER

Division of Co				
SUBJECT: Ybor Two	Investments, Inc			
SUBJECT.	(Name of Res	ulting Florida Lim	ited Con	npany)
				nd fees are submitted to convert an "Othe coordance with s. 605.1045, F.S.
Please return all corres	pondence concerning	g this matter to:		
Forrest Stanley				
	(Contact Person)		_	
	(Firm/Company)		_	
3203 W. Palmetto Street	(Address)		_	
Tampa, FL 33607	(ritalizati)			
•	ty, State and Zip Code)			
justin21998@yahoo.com E-mail Address: (to be	used for future annual re	port notifications)	_	
For further information	n concerning this ma	tter, please call:		
Forrest Stanley		_at (<u>813</u>	_)_389-	
(Name of Contact	Person)	(Area Code	e) (Day	rtime Telephone Number)
Enclosed is a check for dollars and drawn on a			process	sed by this office must be payable in US
V.	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Addre				t Address: Filing Section
Division of Co				ion of Corporations
P.O. Box 6327			The C	Centre of Tallahassee
Tallahassee, Fl	. 32314		2415	N. Monroe Street, Suite 810

Tallahassee, FL 32303

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:

Ybor Two Investments, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
Florida
First organized, formed or incorporated under the laws of
July 21, 2022 on
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization : Ybor Two Investments, LLC
(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 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.



2rd	うる
Signed this 3 day of February	20 <i>&</i>
Signature of Authorized Representative of Lim	ited Liability Company:
_	* 6
Signature of Authorized Representative:	Day _
Printed Name: Forrest E. Stanley	Title: Managing Member
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Printed Name: Forrest E. Stänley	
Printed Name: Forrest E. Stanley	Title: President
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	T: 1
Printed Name:	litte:
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	T
Printed Name:	Little:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida 1 instead Dougen making on 1 instead 1 is bitter	A. I forda d Donas and the
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
Signatures of ALL General Farmers.	
All others:	
Signature of an authorized person.	
<u>Fees:</u>	
	005.00
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited	Liability Company	is:	
Ybor Two Investments, LL			
(Must cont	in the words "Limited Liab	ility Company, "L.L.C.," or "Ll	LC.")
ARTICLE II - Address The mailing address and		principal office of the L	imited Liability Company is:
Principal Office Addre	<u>ss:</u>	Mailing Address:	
3203 W. Palmetto Street		Same	
Tampa, FL 33607			
ARTICLE III - Registe (The Limited Liability Company business entity with an active F The name and the Florid	cannot serve as its own Re lorida registration.)	gistered Agent. You must design	nate an individual or another
<u>Fran</u>	k miranda Na	me	<u> </u>
2000	MA Common Stand		
	W. Cypress Street rida street address (P	O. Box NOT acceptabl	e)
Tamp	ра	FL 33607	
	City	Zip	
liability company a registered agent and a statutes relating to th accept the obligation	t the place designated gree to act in this cap e proper and comple ons of my position as	l in this certificate, I herc Acity. I further agree to te performance of my dut	cess for the above stated limited by accept the appointment as comply with the provisions of alies, and I am familiar with and ided for in Chapter 605, F.S
			ົນຂີ່ 3 ·
	(CONT	INUED)	· ~

ARTICLE IV-

as provided for in s.817.155, F.S.

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	ForrestE.Stanley
	3203 W. Palmetto Street
	Tampa, FL 33607
AMBR	Manuel Mendoza, Sr
	2315 W. Ivy Street
	Tampa, FL 33607
(Use attachment if necessary)	
LE V: Other provisions, if any.	
•	
REQUIRED SIGNATURE:	
- Co	
V9 D V	_
	

Typed of 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)

any false information submitted in a document to the Department of State constitutes a third degree felony