123000330686

(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:
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06/26/23--01032--014 **185.00

SEALLANDS SE STATE

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: T: V Snokehaus and Barbecue Company 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:
Jason Mei Frant (Contact Person)
(Firm/Company)
7259 5W 48th St
(Address)
Buhnell FC 33513 (City, State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Jason Meikrant at (813) 997-5684
(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 US dollars and drawn on a bank located in the United States)
S150.00 Filing Fees (\$25 for Conversion & and Certificate of & and Certified Copy & Certified Copy, and Certificate of Status of Organization)
<i>5</i> ,,
New Filing Section New Filing Section Division of Corporations Division of Corporations
P.O. Box 6327 The Centre of Tallahassee
Tallahassee, FL 32314 Tallahassee, FL 32303 Tallahassee, FL 32303

For

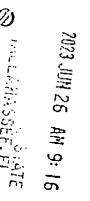
"Other Business Entity"

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:
Til Suckehonse: Barbecal Coupair (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(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 2/27/2023 (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
 The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Ti J Sudsehouse and Barbeure Company LLC. (Enter Name of Florida Limited Liability Company)
(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.
5. 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 day of	20 <u>23 </u>
Signature of Authorized Representative of Lamp	1
Signature of Authorized Representative:	(mull)
Printed Name: Jason Meikrontz	Tide A Al sie
Printed Name: Jason Metartacia	Title: Owner - Charman
Signaturate) on hehalf of Other Dusiness Entitud	(See heless for required signature(s))
Signature(s) on behalf of Other Business Entity:	•
Signature: Then Ruffle T Printed Name: Ton Heiterahtz	
Printed Name: The Maiken ht	Title: An-Charles Chaire
Timed Name. 1000 Meterative	Title. Of Case Case
Signature:	
Signature: Printed Name:	Title
Trinied (value)	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
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 Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
	#3 5.00
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

2023 JUH 26 AH 9: 16
SELL
SELL
SELL
SELL
SALESSEE PATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:				
(Must contain the words "Limited Liability	Barbeau Company, "L.L.C	Company. L	LC_	
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office c	of the Limited Lia	ability Compa	ıny is:
Principal Office Address:	Mailing Add	dress:		
7259 Sw 48th St Bushell, FC 33513	7059 SU Budal	u 484 st D, PCL 33517	3	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)				
The name and the Florida street address of the relation Melkra.				
name				
7259 SW 48th Florida street address (P.O.	∫ Box <u>NOT</u> acc	ceptable)		
Burnell City				
City	Z	Zip		
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete paccept the obligations of my position as registered Agent's Sign.	this certificate ty. I further ag erformatice of istered agont o	Thereby accept to gree to comply with my duties, and I a as provided for in	the appointme th the provision im familiar w	ent as ons of ali ith and F.S.,
(CONTINI	JED)		HASSER	•

ARTICLE IV-

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

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<u>r</u>
LAHASSI
m- mo:

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)