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(Dawyana la Nama)
(Requestor's Name)
(Address)
(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:
(City/State/Zin/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
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MILL SEE TOOM

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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: LEGRA CABINET & INSTALLA	TIONS LLC	
(Name of Re	sulting Florida Limit	ed Company)
The enclosed Articles of Conversion, Articles Entity" into a "Florida Limited L		on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence concernit	ng this matter to:	
DENNY LEGRA RODRIGUEZ		
(Contact Person)		
(Firm/Company)		
722 HAZY MEADOW CT		
(Address)		
BRANDON, FL 33510		
(City, State and Zip Code)		
DENYLEGRA@GMAIL.COM		
E-mail Address: (to be used for future annual r	eport notifications)	
For further information concerning this ma	atter, please call:	
DENNY LEGRA RODRIGUEZ	at (<u>813</u>	863-0840
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amo dollars and drawn on a bank located in the	•	rocessed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\int \frac{1}{2} \frac\	□\$180.00 Filing and Certified Cop	
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

INHS11 (7/17)

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 Arti LEGRA CABINET & INSTALLATIONS INC (Enter Name of Other Business Entity)		
CORPORATION		
2. The "Other Business Entity" is a		
(Enter entity type. Example: corporation, limited partnership, general partnership, com-	mon law or business t	rust, etc.)
First organized, formed or incorporated under the laws of	the name of the count	_ ry)
06/17/2023 on		
(date of organization, formation or incorporation)		
3. The name of the Florida Limited Liability Company as set forth in the attached Ai	rticles of Organiz	ation:
LEGRA CABINET & INSTALLATIONS LLC		
(Enter Name of Florida Limited Liability Company)	<u> </u>	
4. If not effective on the date of filing, enter the effective date:		a aftau
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 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 document's effective date on the Department of State's records.	90 calendar day	
(The effective date: Cannot be prior to date of receipt or filed date nor more than 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	90 calendar day	
(The effective date: Cannot be prior to date of receipt or filed date nor more than 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 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 appropriate the state of the plan of conversion has been approved in accordance with all applicable statutes 6.	a 90 calendar day date will not be listed as.	as the
(The effective date: Cannot be prior to date of receipt or filed date nor more than 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 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.	a 90 calendar day date will not be listed as.	as the
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Signed	l this <u>17</u>	_ day of JUNE		20 23	
Signat	ure of Author	ized Representative		ed Liability Company:	
Signate Printed	ure of Authoriz Name: <u>DENNY</u>	ed Representative: _ LEGRA RODRIGUEZ	Jung	Title: PRESIDENT	
Signat	ure(s) on behal	f of Other Business l	Entity: [S	ee below for required signature	e(s)
Signate	are:				
Printed	Name:			Title:	
Signati	ıre;				
Printed	Name:			Title:	
Signati	ire.				
Printed	Name:			Title:	
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Printed	Name:			Title:	
Printed	ıre: Name:			Title:	
Signati Printed	ıre: Name:			Title:	
Timee					
	<u>ida Corporatio</u>	on: , Vice Chairman, Dire	anton on O	fticar	
_		s have not been selecte			
If Flor	ida General Pa	artnership or Limited	l Liability	Partnership:	
Signati	ire of one Gene	ral Partner.			
	<u>ida Limited Pa</u> ires of <u>ALL</u> Ge		l Liability	Limited Partnership:	
All oth Signatu	iers: ure of an authori	ized person.			
Fees:					
	Articles of Co Fees for Florid Certified Copy Certificate of	da Articles of Organi: y:	zation:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability	Company is:		
LEGRA CABINET & INSTALLATION	SLLC		
(Must contain the words	"Limited Liability Comp	any, "L.L.C.," or "LLC.")	
ARTICLE II - Address:			
The mailing address and street add	dress of the principa	d office of the Limited	d Liability Company is:
Principal Office Address:	Mai	iling Address:	
722 HAZY MEADOW CT	722	HAZY MEADOW CT	
BRANDON FL 33510	BRA	DENTON, FL 33510	
ARTICLE III - Registered Agen (The Limited Liability Company cannot serve business entity with an active Florida registr	e as its own Registered Agration.)	ent. You must designate an i	
The name and the Florida street ac	idress of the registe	red agent are:	
DENNY LEGRA	RODRIGUEZ		
	Name		
722 HAZY MEA	ADOW CT		
Florida street	address (P.O. Box	NOT acceptable)	
BRANDON'	F	L 33510	
	City	Zip	
Having been named as registere liability company at the place registered agent and agree to acstatutes relating to the proper of accept the obligations of my Registered	e designated in this c t in this capacity. 1) and complete perfort	ertificate, I hereby acc further agree to compl mance of my duties, and agent as provided for (REQUIRED)	cept the appointment as ly with the provisions of all nd I am familiar with and

ARTICLE IV-

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

Name and Address:	
DENNY LEGRA RODRIGUEZ	
	
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	DENNY LEGRA RODRIGUEZ 722 HAZY MEADOW CT BRANDON, FL 33510

REQUIRED SIGNATURE:

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.

DENNY LEGRA RODRIGUEZ

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)