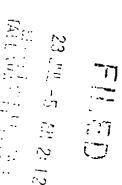
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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only

## **COVER LETTER**

TO: New Filing Section Division of Corporations		
SUBJECT: YNOTTAC, LLC		
	Resulting Florida Limited Company)	
	ticles of Organization, and fees are submitted Liability Company" in accordance with s. 60	
Please return all correspondence concern	ing this matter to:	
Tony Bettis		
(Contact Person)		
YNOTTAC, LLC		
(Firm/Company)		
3802 6th Avenue		
(Address)		<del>-</del> ,
Holmes Beach, Florida 34217		23
(City, State and Zip Code	2)	
ynotbettis@gmail.com		M. h
E-mail Address: (to be used for future annual	report notifications)	ere e
For further information concerning this r	natter, please call:	* 2: :: 2:
Tony Bettis	at ( 719 ) 640-6955	.:. :3
(Name of Contact Person)	(Area Code) (Daytime Telephone Numbe	г)
Enclosed is a check for the following am dollars and drawn on a bank located in the	nount: (All checks processed by this office munic United States)	ist be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing Fees and Certificate of Status	s S180.00 Filing Fees and Certified Copy Certified Copy, and Certificate of Status	s,
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	

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 Art Ynot, LLC	cicles of Conversion is:
(Enter Name of Other Business Entity)	<del></del>
2. The "Other Business Entity" is a limited liability company  (Enter entity type. Example: corporation, limited partnership, general partnership, com	
(Enter entity type. Example: corporation, limited partnership, general partnership, com	imon law or business trust, etc.
First organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity,	
(Enter state, or if a non-U.S. entity,	the name of the country)
December 2, 2014	
(date of organization, formation or incorporation)	23 541
3. The name of the Florida Limited Liability Company as set forth in the attached A	rticles of Organization:
YNOTTAC, LLC	- 35 h [
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date:	2
(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 statute	es.

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 29th day of June	20 23
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Me Printed Name: Tony Bettis  Signature(s) on behalf of Other Business Entity:	Title: Mathemated Member
Signature: My Hell	1 6 \/
Printed Name: Tony Bettis	Title: Authorized Member
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Interpretation of the Control Partnership or Limited Liabilia Signature of the Control Partner	corporator must sign.
Signature of one General Partner.  If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

23 JUL -5 RM 2: 1

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Cor	mpany is:
YNOTTAC, LLC	
(Must contain the words "Lin	nited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3802 6th Ave	3802 6th Avenue
Holmes Beach, Florida 34217	Holmes Beach, Florida 34217
business entity with an active Florida registration.  The name and the Florida street address  Tony Bettis	$\mathbb{S}^{p} \subseteq \mathbb{N}$
3802 6th Avenue	
	dress (P.O. Box <u>NOT</u> acceptable)
Holmes Beach	FL 34217
liability company at the place des registered agent and agree to act in t statutes relating to the proper and accept the obligations of my posit	Zip  gent and to accept service of process for the above stated limited vignated in this certificate, I hereby accept the appointment as this capacity. I further agree to comply with the provisions of all complete performance of my duties, and I am familiar with and tion as registered agent as provided for in Chapter 605, F.S  cnt's Signature (REQUIRED)

### ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR	Tony Bettis
AMBK	3802 6th Avenue
	Holmes Beach, Florida 34217
	Hollies Beach, Florida 34217
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(Use attachment if necessary)	ا مراجع ما الله الله الله الله الله الله الله ال
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LE V: Other provisions, if any.	1
	3
	<del></del> <del></del>
NEOUNE STATE 1	./
REQUIRED SIGNATURE:	//
MAA Sell	
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 awan
any false information submitted in a docu	ment to the Department of State constitutes a third degree
as provided for in s.817.155, F.S.	
	Tony Bettis
Tv	ped 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)