L23000356772

(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:

Office Use Only



400411491434



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date _	07/31/2023		
Name	Marcel	····	
Refere	nce #. 2074	001	
Entity I	Name	MIGIZI PROP	ERTIES LLC
V	Articles of Incorporation	/Authorization to T	ansact Business
	Amendment		
	Change of Agent		
	Reinstatement		
\checkmark	Conversion		
	Merger		
	DissolutionWithdrawal		
	Fictitious Name		
	Other		<u></u>
Author	ized Amount	150.00	_
Signati	ure JBialowe	as	

COVER LETTER

10:	Division of Co					
CHIDI	ECT:	Migi	izi Pro	perties L	LC	
SUDJ	EC1	(Name of Resi	ılting F	lorida Limite	ed Com	pany)
The en	nclosed Articles ess Entity" into	s of Conversion, Articl a "Florida Limited Lia	es of (ability	Organizatio Company	on, and	d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please	e return all corre	espondence concerning	g this r	natter to:		
	Gı	regory E. Pearson				
		(Contact Person)				
	Mię	gizi Properties LLC				
		(Firm/Company)				
	639	93 Lyford Isle Drive				
		(Address)			•	
	1	Naples, FL 34113				
	((City, State and Zip Code)			-	
	g	reg@tenesis.com				
E-1	nail Address: (to b	e used for future annual re	port not	ifications)	•	
For fu	arther informati	on concerning this ma	tter, pl	ease call:		
	Gregory	E. Pearson	at (630)	699-2699
	(Name of Conta	ict Person)			(Day	time Telephone Number)
		for the following amount a bank located in the			process	sed by this office must be payable in US
(\$25 fo & \$12	50.00 Filing Fees or Conversion 5 for Articles (anization)	☐\$155.00 Filing Fees and Certificate of Status		80.00 Filing Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee,	ection Corporations 27		·	New Division The Co. 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form to convert an "Other Business Entity" into a "Florida Limited Liability Company" pursuant to section 605.1045, Florida Statutes. These forms are basic and may not meet all conversion needs. The advice of an attorney is recommended.

Pursuant to s. 605.0102(23)a, F.S., entity means: a business corporation, a nonprofit corporation, a general partnership, including a limited liability partnership, including a limited partnership, including a limited liability limited partnership; a limited liability company; a real estate investment trust; or any other domestic or foreign entity that is organized under an organic law.

Filing Fees: \$150.00 (\$25 for Articles of Conversion and

\$125 for Articles of Organization)

Certified Copy (optional): \$30.00

Certificate of Status (optional): \$5.00

Send one check in the total amount payable to the Florida Department of State.

Please include a cover letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

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

For further information, you may contact the New Filing Section at (850) 245-6052.

Important Notice: As a condition to the conversion, pursuant to s.605.0212(9), F.S., each party to the conversion must be active and current through December 31 of the calendar year this document is being submitted to the Department of State for filing.

INHS11 (7/17)

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.

The name of the "Other Business Entity" immediately properties. PEARSON HOLDINGS LLC	rior to the filing of the Articles of Conversion is:
(Enter Name of Other Business E	intity)
The "Other Business Entity" is a (Enter entity type. Example: corporation, limited partners)	limited liability company
(Enter entity type. Example: corporation, limited partner	ership, general partnership, common law or business trust, etc.)
return to the large of	Illinois
(Ent	er state, or if a non-U.S, entity, the name of the country)
on	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as MIGIZI PROPERTIES LLC	<u></u> .
(Enter Name of Florida Limited Liability	Company)
4. If not effective on the date of filing, enter the effective of (The effective date: Cannot be prior to date of receipt of the date this document is filed by the Florida Department Note: If the date inserted in this block does not meet the applicable standocument's effective date on the Department of State's records.	r filed date nor more than 90 calendar days after ent of State.)
5. The plan of conversion has been approved in accordance	with all applicable statutes.
6. The "Converted or Other Business Entity" has agreed to pa which such members are entitled under ss. 605.1006 and 6	ay any members having appraisal rights the amount to 605.1061-605.1072, F.S.

Signed	this <u> </u>	_ day of	May	20	23	
	ure of Author					npany:
Sionati	re of Authoriz	red Rennesents	ative.	S. Co		,
Printed	Name:	Grogory E. P	oarson	Title:	·	Manager
Signati	ire(s) on beha	lf of Other Bu	siness Entity:	See belo	w for req	uired signature(s)]
		102				
Signatu	re:	1 2				· · · · · · · · · · · · · · · · · · ·
Printed	Name:	Gregory E. P	earson	Title:		Manager
Sienatu	re:					
Printed	Name:	· • · · ·		Title		
Signatu	re:					
Printed	Name:	· · · · · · · · · · · · · · · · · · ·	·	Title:		
6 *						
Signatu	re:	· · · · · · · · · · · · · · · · · · · 		201.1	········	
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Signatu	re:					· · · · · · · · · · · · · · · · · · ·
Printed	Name:			Title:	 	
lf Flori	da Corporatio	on:				
	re of Chairmar		an. Director.	or Officer.		
_	tors or Officer	•			or must sig	ın.
	da General Pa		<u>Limited Liab</u>	ility Partn	ership:	
Signatu	re of one Gene	rai Paruler.				
If Flori	da Limited Pa	rtnershin or	Limited Liab	ility Limit	ed Partne	rshin:
	res of ALL Ge				X7- X 41-1-1-0	* District
_						
All oth						
Signatu	re of an author	ized person.				
Fees:						
	Articles of Co	nversion:		\$25.00)	
	Fees for Flori		Organization			
	Certified Cop		O. Pomiration) (Optiona	D.
	Certificate of	·			(Optional)	•
		~~~~		Ψ5.00	(Obrorm)	,

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	MIGIZI PROPER	TIES LLC
(M	ust contain the words "Limited Liabili	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Ac The mailing addre		rincipal office of the Limited Liability Company
Principal Office	Address:	Mailing Address:
6393 LvI	ord Isle Drive	6393 Lyford Isle Drive
Naples	s, FL 34113	Naples, FL 34113
ARTICLE III - R (The Limited Liability C business entity with an	Registered Agent, Registered	Naples, FL 34113  H Office, & Registered Agent's Signature: lered Agent. You must designate an individual or another
ARTICLE III - R (The Limited Liability C business entity with an	Registered Agent, Registered Company cannot serve as its own Registactive Florida registration.)  Florida street address of the COGENCY G	Naples, FL 34113  H Office, & Registered Agent's Signature: tered Agent. You must designate an individual or another registered agent are: LOBAL INC.
ARTICLE III - R (The Limited Liability C business entity with an	Registered Agent, Registered Company cannot serve as its own Registactive Florida registration.)  Florida street address of the COGENCY G	Naples, FL 34113  H Office, & Registered Agent's Signature: tered Agent. You must designate an individual or another registered agent are:  LOBAL INC.
ARTICLE III - R (The Limited Liability C business entity with an	Registered Agent, Registered Company cannot serve as its own Registactive Florida registration.)  Florida street address of the COGENCY GOMENT Marm	Naples, FL 34113  H Office, & Registered Agent's Signature: tered Agent. You must designate an individual or another registered agent are:  LOBAL INC.
ARTICLE III - R (The Limited Liability C business entity with an	Registered Agent, Registered Company cannot serve as its own Registactive Florida registration.)  Florida street address of the COGENCY GONAMM 115 North Calhou Florida street address (P.C.)	Naples, FL 34113  H Office, & Registered Agent's Signature: tered Agent. You must designate an individual or another registered agent are:  LOBAL INC.
ARTICLE III - R (The Limited Liability C business entity with an	Registered Agent, Registered Company cannot serve as its own Registactive Florida registration.)  Florida street address of the COGENCY GOMENT Marm	Naples, FL 34113  H Office, & Registered Agent's Signature: tered Agent. You must designate an individual or another registered agent are:  LOBAL INC.

rited as of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Dia Laugher Tia Baugher, Asst. Sec.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

#### **ARTICLE IV-**

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

"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Gregory E. Pearson
(Use attachment if necessary)	
TERM Od 11 10	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
LE V: Other provisions, if any.  REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	on authorized representative of a member
REQUIRED SIGNATURE:  Signature of a member or	an authorized representative of a member with section 605 0203 (1) (b) Florida Statutes Lam august to
REQUIRED SIGNATURE:  Signature of a member or  This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware ti
Signature of a member or This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware ti
Signature of a member or: This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes. I am aware to the Department of State constitutes a third degree fel-
Signature of a member or This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.  Green	with section 605.0203 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree fellogory E. Pearson
Signature of a member or This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.  Green	with section 605.0203 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree fellogory E. Pearson ped or printed name of signee
Signature of a member or:  This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.  Great	with section 605.0203 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree fellogory E. Pearson

PH 2: 00