L23000360516

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

New Filing Section Division of Corporations

TO:

SUBJECT: <u>Lai</u> e	internet bu	SIKESSS alling Florida Limit		pany)
The enclosed Articles Business Entity" into	s of Conversion, Artic a "Florida Limited Li	les of Organizati ability Company	on, and	I fees are submitted to convert an "Othe cordance with s. 605,1045, F.S.
Please return all corre	espondence concerning	g this matter to:		
Tomer c	lavid			
	(Contact Person)		=	
Luie inter	(Contact Person) Nel businesse > (Firm:Company)	<u>[</u> [c		
- 4191 woods	end RV (Address)			
Raa ratin 3	•		_	
Tomerdavid 3	ity, State and Zip Code) 230 grail, coe e used for future annual re	า 	-	
For further information	on concerning this ma	tter, please call:		
Tomer david		2404	. 00	SE U.T 3
(Name of Contact	ct Person)	at (<u>240</u> 1 (Area Code)) <u>90</u> (Davt	ime Telephone Number)
Enclosed is a check for dollars and drawn on	or the following amou	int: (All checks p		ed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Addr				Address:
New Filing Se				iling Section
Division of Co P.O. Box 632	•			on of Corporations entre of Tallahassee
Tallahassee, F				entre of Tallahassee N. Monroe Street, Suite 810
	 · ·			or commercial purity of the

Tallahassee, FL 32303

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corp. (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
on November 3rd 2015 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Lyie internet businesses [[c] (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 07.20.2023 (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.

Signed this OA day of 20	20 2 3
	ed Liability Company:
لىكى لىمىرىنى بىرىياتى يىلىنى بىرىياتى بىرىياتى بىرىياتى بىرىياتى بىرىياتى بىرىياتى بىرىياتى بىرىياتى بىرىياتى ئىرى ئىرى ئىرى بىرى ئىرى ئىرى ئىرى ئىرى	
Signature of Authorized Representative of Printed Name: Torser Court	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s
Sionature	
Signature(s) on behalf of Other Business Finds. Printed Name: Tomer david	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:Printed Name:	Tido
Signature:Printed Name:	Title
Printed Name:	THIC.
Signature:Printed Name:	Title
Printed Name:	_ Truc
Signature:Printed Name:	Title:
Printed Name:	_ TRIC
If Florida Corporation:	Officer
Signature of Chairman, Vice Chairman, Director, or C	Officel.
If Directors or Officers have not been selected, an Inc	corporator musi sign.
lf Florida General Partnership or Limited Liabili	y Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	· .
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
Centificate of Status.	#=.55 (~[············

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The mailing address and street address of the principal office of the Limited Liability Company is:

Bora Raton, FL, 37487 box raton, FL, 37187

Mailing Address:

Luie internet businesses I/C
(Must contain the words" I mited Liability Company, "I.I. (," or "I.C.")

ARTICLE 1 - Name:

ARTICLE II - Address:

Principal Office Address:

The name of the Limited Liability Company is:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent, You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Tomer david
Torrer david
4191 hoods end RD
Florida street address (P.O. Box NOT acceptable)
Baca Raton FL 33487 City Zip
Baca Raton FL 33487 City Zip
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions 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.,
"interto
Registered Agent's Signature (REQUIRED)
(CONTINUED)

Title: "AMBR" Authorized Member "MGR" Manager	Name and Address:
MGR	Tomer david Lygn wolfs end RD Lace refor/1/1, 33437
(Use attachment if necessary) LE V: Other provisions, if any.	
·	
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document provided for in \$ 817.155. F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree fe