L23000362598

(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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COVER LETTER

TO:	New Filing Son Division of C				
CHDI	ne core. Myrtle Br	each Carpet, LLC			
SUBI)F.C. I	(Name of Res	ulting Florida Limit	ed Corr	npany)
The e Busin	nclosed Article less Entity" into	s of Conversion, Artic a "Florida Limited Li	les of Organization ability Company	on, and Tin ac	d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please	e return all corr	espondence concernin	g this matter to:		
Micha	ael Wadsworth				
		(Contact Person)			
Clyde	Snow & Session	ns, PC			
		(Firm/Company)			
201 S	South Main Street	. Suite 2200			
		(Address)			
Salt L	ake City, UT 841	11			
	((City, State and Zip Code)			
inwwi	@clyaesnow.con	١			
E-1	mail Address: (to b	e used for future annual re	port notifications)		
For fi	arther informati	on concerning this ma	tter, please call:		
Micha	ael Wadsworth		_at (433-	2429
	(Name of Conta	act Person)	(Area Code)	(Day	rtime Telephone Number)
Enclo dollar	osed is a check f rs and drawn on	for the following amou a bank located in the	int: (All checks p United States)	rocess	sed by this office must be payable in US
(\$25 f) & \$12	50.00 Filing Fees or Conversion 5 for Articles (anization)	S155.00 Filing Fees and Certificate of Status	S180.00 Filing and 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 I Divis The C	t Address: Filing Section ion of Corporations Tentre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Conversion

For

"Other Business Entity"

lnto

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.

	(Enter Name of Other Business Entity)
2	The "Other Business Entity" is a
۷٠.	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
	st organized, formed or incorporated under the laws of Utah
I· ir	st organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the name of the country)
	July 15, 2021
υn	(date of organization, formation or incorporation)
3.	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Му	rile Beach Carpet, LLC
4. (T)	(Enter Name of Florida Limited Liability Company) 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
(T) the Not	
(T) the <u>Not</u> doc	If not effective on the date of filing, enter the effective date: ne effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after date this document is filed by the Florida Department of State.) e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

Signed thi	s_6thday of _January	2023
Signature	of Authorized Representative	e of Limited Liability Company:
	of Authorized Representative:	(m)
Signature	of Authorized Representative:	Title: Manager
Printed Na	ime: John Michael Frasei	Title: Manager
<u>Signature</u>	(s) on behalf of Other Business	s Entity: [See below for required signature(s)]
Signature:	71111	
Printed Na	ime: John Michael Fraser	Title: Manager
Classin		
Drinted No	imie:	Title:
rimicu iv.		
Signature:		
Printed Na	ame:	Title:
<i>(</i>):		
Signature:		Title:
Piliteo Na	ame:	
Signature:		
Printed Na	ame:	Title:
Signature:		Title:
Printed Na	ame:	11110.
Signature	<u>Corporation:</u> of Chairman, Vice Chairman, D rs or Officers have not been sele	irector, or Officer. cted, an Incorporator must sign.
	General Partnership or Limit of one General Partner.	ed Liability Partnership:
If Florida Signatures	Limited Partnership or Limits of ALL General Partners.	ed Liability Limited Partnership:
All others Signature	s: of an authorized person.	
Fees:		
A	rticles of Conversion:	\$25.00
	es for Florida Articles of Orga	nization: \$125.00
	ertified Copy:	\$30.00 (Optional)
	ertificate of Status:	\$5.00 (Optional)
=		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Myrtle Beach Carpet,							
Abel	LLC	Liability Company, "L.IC.," or "LLC.")					
(.5105)	contain he wores thinned	Chairmy Company, Limital Co. Miles,					
ARTICLE II - Add The mailing address	lress: and street address of	the principal office of the Limited L	iability Company is:				
Principal Office Address:		Mailing Address:	Mailing Address:				
682 Canopy Estates	Dr.	682 Canopy Estates Dr.					
Winter Garden, FL 34	1787	Winter Garden, FL 34787					
							
	John Michael Fraser	f the registered agent are: Name	FIL 2023 AUG -2 ALL AHASSE				
	682 Canopy Estates Dr		1 1 2				
		•					
			PH III				
•		s (P.O. Box <u>NOT</u> acceptable) FL 34787	1 2:13				
•	Florida street address	s (P.O. Box NOT acceptable)	·				

(CONTINUED)

Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager Fraser Empire, LLC MGR 124 S. Dry Creek Ln. Vineyard, UT 84059 Ryan Moon MGR 124 S. Dry Creek Ln. Vineyard, UT 84059 (Use attachment if necessary) ARTICLE V: Other provisions, if any. 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 felogy as provided for in \$ \$17,155, F.S. John Michael Fraser 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 (Outland) \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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

ARTICLE IV-