# L23000363133

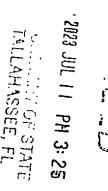
(Re	equestor's Name)	
(Ad	ldress)	
	ldress)	<del></del>
(Au	iuless)	
(Cit	ty/Stat <mark>e/Z</mark> ip/Phone	+#)
PICK-UP	■ WAIT	MAIL
(D)	rainaga Entity Nam	
ud)	siness Entity Nam	ie)
(Do	cument Number)	
Certified Copies	Certificates	of Status
	_	
Special Instructions to	Filing Officer:	

Office Use Only



800406886918

04/25/23--01009--019 \*\*150.00



W23000087595

W230000 68561



RECEIVED

# 2023 JUL 11 AM 9: 02

Division of Corporations

June 22, 2023

MADINA BAHRETDINOVA MIACCOUNTING CO 800 SE 4 TH AVE, STE 711 HALLANDALE BEACH, FL 33009 US

SUBJECT: ANDRU S LLC Ref. Number: W23000087595

We have received your document for ANDRU S LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Signature(s) on behalf of Other Business Entity is missing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please calles (850) 245-6052.

Dil Sultana Regulatory Specialist II

Letter Number: 223A0001417



# FLORIDA DEPARTMENT OF STATE Division of Corporations

May 11, 2023

MADINA BAHRETDINOVA MIACCOUNTING CO 800 SE 4 TH AVE, STE 711 HALLANDALE BEACH, FL 33009 US

SUBJECT: ANDRU S LLC Ref. Number: W23000068561

We have received your document for ANDRU S LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Certificate of Conversion must be signed by an authorized person.

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Dil Sultana Regulatory Specialist II

www.sunbiz.org

Letter Number: 723A00010764

### **COVER LETTER**

TO: New Filing So Division of C					
SUBJECT: ANDRU	SLLC				
	(Name of Res	ulting Florida Limi	ted Con	npany)	-
				d fees are submitted to ecordance with s. 605.1	
Please return all corre	espondence concernin	g this matter to:			
MADINA BAHRETDIO	NOVA				
	(Contact Person)		••		
MIACCOUNTING CO					
-	(Firm/Company)		_		
800 SE 4 TH AVE, ST	E 711				
	(Address)		<b>-</b>		
HALLANDALE BEACH	I, FL 33009				-
	City, State and Zip Code)	<del>.</del>	_		2027
info@miaccounting.us					
E-mail Address: (to b	e used for future annual re	port notifications)	_		- T
For further informati	on concerning this ma	tter, please call:			12023 JUL 11 PH 3: 25
MADINA BAHRETDIO	NOVA	_at ( <u></u>	\610 £	2704	Fig. 4
(Name of Conta	act Person)	(Area Code	_/ ) (Day	ytime Telephone Number)	- FA 25
	for the following amou a bank located in the		oroces	sed by this office must	be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co	•	☐S185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Add	ress:		Stree	t Address:	
New Filing S				Filing Section	
Division of C	•			ion of Corporations Centre of Tallahassee	
P.O. Box 632	. /		THE C	Lentite of Tananassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## **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 Articles of Conversion is:

ANUN		·
	(Enter Name of Other Business Entity)	
2. Th	ne "Other Business Entity" is a	
	(Enter entity type. Example: corporation, limited partnership, general partner	ship, common law or business trust, etc
First o	organized, formed or incorporated under the laws of	
	(Enter state, or if a non-U.	S. entity, the name of the country)
	)/19/2018 	. 207
(da	ate of organization, formation or incorporation)	2023 JUL 3
3. Th	ne name of the Florida Limited Liability Company as set forth in the atta	iched Articles of Organization:
ANDR	RUSLLC	SS P
	(Enter Name of Florida Limited Liability Company)	PM 3: 25 OF STATI
4. If 1	not effective on the date of filing, enter the effective date:	
the da	ate this document is filed by the Florida Department of State.)	ore man 70 carendar days arrei
	If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	ents, this date will not be listed as the
5. The	e plan of conversion has been approved in accordance with all applicabl	e statutes.
6. The	e "Converted or Other Business Entity" has agreed to pay any members hav	ving appraisal rights the amount to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Certified Copy:

\$30.00 (Optional)

Certificate of Status:

\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:  ANDRU S LLC  (Must contain the words "Limited Liability Company, "L.L.C." or "LL.C.")  ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:  Principal Office Address:  Mailing Address:  Mailing Address:  1401 VILLAGE BLVD 826  WEST PALM BEACH, FL 33409  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:  ANDREI SIDARKEVICH Name  1401 VILLAGE BLVD 826  Florida street address (P.O. Box NOT acceptable)  WEST PALM BEACH FL 33409  City  Zip  WEST PALM BEACH FL 33409  City  Zip  Having been named as registered agent and to accept service of process for the aboye stated limite 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 statutes relating to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.  Registered Agent's Signature (REQUIRED)	ARTICLE I - Name:		
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")  ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:  Principal Office Address:  Mailing Address:  Mailing Address:  1401 VILLAGE BLVD 826 WEST PALM BEACH, FL 33409  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:  ANDREI SIDARKEVICH Name  1401 VILLAGE BLVD 826 Florida street address (P.O. Box NOT acceptable) WEST PALM BEACH FL 33409 City Zip WEST PALM BEACH 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 estatutes 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.	The name of the Limited Liability Company is:		
ARTICLE II - Address:  The mailing address and street address of the principal office of the Limited Liability Company is:  Principal Office Address:  Mailing Address:  1401 VILLAGE BLVD 826  WEST PALM BEACH, FL 33409  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:  ANDREI SIDARKEVICH  Name  1401 VILLAGE BLVD 826  Florida street address (P.O. Box NOT acceptable)  WEST PALM BEACH  FL 33409  City  City  Zip  Having been named as registered agent and to accept service of process for the above stated limite 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 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.			
The mailing address and street address of the principal office of the Limited Liability Company is:  Principal Office Address:  Mailing Address:  1401 VILLAGE BLVD 826 WEST PALM BEACH, FL 33409  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:  ANDREI SIDARKEVICH Name  1401 VILLAGE BLVD 826 Florida street address (P.O. Box NOT acceptable) WEST PALM BEACH FL 33409  City Zip  WEST PALM BEACH Having been named as registered agent and to accept service of process for the adoption 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 a 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.	(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")	
1401 VILLAGE BLVD 826 WEST PALM BEACH, FL 33409  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:  ANDREI SIDARKEVICH Name  1401 VILLAGE BLVD 826 Florida street address (P.O. Box NOT acceptable)  WEST PALM BEACH FL 33409  City Zip  Having been named as registered agent and to accept service of process for the above stated limite 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 a 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.		ncipal office of the Limited	Liability Company is:
WEST PALM BEACH, FL 33409  WEST PALM BEACH, FL 33409  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:  ANDREI SIDARKEVICH  Name  1401 VILLAGE BLVD 826  Florida street address (P.O. Box NOT acceptable)  WEST PALM BEACH  FL 33409  City  Zip  West palm 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 a 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.	Principal Office Address:	Mailing Address:	
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:  ANDREI SIDARKEVICH  Name  1401 VILLAGE BLVD 826  Florida street address (P.O. Box NOT acceptable)  WEST PALM BEACH  City  Zip  With an acceptable of 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 a 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.	1401 VILLAGE BLVD 826	1401 VILLAGE BLVD 826	_
(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:  ANDREI SIDARKEVICH  Name  1401 VILLAGE BLVD 826 Florida street address (P.O. Box NOT acceptable)  WEST PALM BEACH  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 a statutes relating to the proper and complete performance of my duties, and I am familiar with analysis accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.	WEST PALM BEACH, FL 33409	WEST PALM BEACH, FL 33	409
Name    1401 VILLAGE BLVD 826	(The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	red Agent. You must designate an im	
Name    1401 VILLAGE BLVD 826	ANDREI SIDARKEVICH		
City Zip  Having been named as registered agent and to accept service of process for the above stated limite 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 a 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		·	
City Zip  Having been named as registered agent and to accept service of process for the above stated limite 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 a 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	1401 VILLAGE BLVD 826		2028
City Zip  Having been named as registered agent and to accept service of process for the above stated limite 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 a 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		Box NOT acceptable)	
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 a 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	WEST PALM BEACH	FL 33409	AHAX AHAX
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 a 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	City		SSE PH
	liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete p accept the obligations of my position as regi	this certificate, I hereby acce ty. I further agree to comply erformance of my duties, and istered agent as provided for	the above stated limited ept the appointment as with the provisions of a d I am familiar with and

#### 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	ANDREI SIDARKEVICH	
	1401 VILLAGE BLVD 826	<u></u>
	WEST PALM BEACH, FL 33409	
	<u> </u>	_
		_
		_ <del></del>
		_
		_
(Use attachment if necessary)		~
(Ose anaemient it necessary)	ਹ <sub>ੋ</sub> :	10r 8202
	<u> </u>	<u></u> ∃ '11
ARTICLE V: Other provisions, if any.		
	<u>\$3</u>	
	AHASSEE	
		( E
	/ FLA	<del></del>
<u>REQUIRED</u> SIGNATURE:	M	25

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.

ANDREI SIDARKEVICH

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)