# 123000377038

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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SECULIARY OF STATE

#### **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: Bourbon Street Enterprises, LLC (Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Michael Finley (Contact Person)  Bourbon Street Enterprises 2CC (Firm/Company)  330 NE 15th St. Cape Capal, FC 33909
330 NE 15th St. Cape Catal, FC 33909  (Address)
Cape Cora FL 33909 (City, State and Zip Code)
E-mail Address: (46 be used for future annual report notifications)
For further information concerning this matter, please call:
(Name of Contact Person) at (708) 949-6193 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
AS150.00 Filing Fees
Mailing Address:Street Address:New Filing SectionNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810 FlTallahassee, 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:  Bourbon Street Enterprises, LLC  (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Nevada (Enter state, or if a non-U.S. entity, the name of the country)
on Soly 104, 2012 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Bour hom Street Enterprises, LLC (Enter Name of Florida Limited Liability Company)
4. 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 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.
FL 08

Signed this	July 2023	
Signature of Authorized Represe	entative of Limited Liability Compa	a <u>ny:</u>
Signature of Authorized Represent Printed Name: Michael Fin	tative: May Title: May	naser
Signature(s) on behalf of Other B	usiness Entity:  See below for requir	red signature(s)
Signature: Michael Finds	Title: Mana	350
Signature:Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Floricetors or Officers have not been	nan, Director, or Officer. en selected, an Incorporator must sign.	
If Florida General Partnership or Signature of one General Partner.	Limited Liability Partnership:	
If Florida Limited Partnership or Signatures of <u>ALL</u> General Partners	Limited Liability Limited Partners) s.	nip:
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)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Cape Coral, FL 33509	330 NE 15th St.  Cape Coral, FL 339009
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	
The name and the Florida street address of the r	egistered agent are:
Michael Fin	, ley
330 NE 15 Florida street address (P.O.	
<u>Lape Coral</u> City	, FL <u>33909</u> Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and its its ered agent as provided for in Chapter 605, F.S
Modern	2003 3
Registered Agent's Sign (CONTIN	ASSE

#### ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager $M G R$	Michael Finley 330 NE 15th St. Cape Coral, FL 33909
<del></del>	
Use attachment if necessary)	
LE V: Other provisions, if any.	
LE V: Other provisions, if any,	mes shall continue
LEV: Other provisions, if any.	mes shall continue
LEV: Other provisions, if any.	mes shall continue
This document is executed in accorda	or an authorized representative of a member nee with section 605.0203 (1) (b), Florida Statutes. I am aware that becoment to the Department of State constitutes a third degree-felon
REQUIRED SIGNATURE:  Signature of a member This document is executed in accordary false information submitted in a document of a provided for in s.817.155. F.S.	or an authorized representative of a member nee with section 605.0203 (1) (b), Florida Statutes. Lam aware that becument to the Department of State constitutes a third degree-felon of Finley, Manager
REQUIRED SIGNATURE:  Signature of a member of any false information submitted in a dot as provided for in s.817.155. F.S.  Michael	or an authorized representative of a member nee with section 605.0203 (1) (b), Florida Statutes. I am awage that