L23000378278

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Sources 2 mm, round)
(Document Number)
Certified Copies Certificates of Status
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June 23, 2023

JASON BODNICK MMK 2013 LLC 407 SE 4TH AVE DELRAY BEACH, FL 33483 US

SUBJECT: MMK 2013 LLC Ref. Number: W23000088123

We have received your document for MMK 2013 LLC and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Only non-United States entities may become a domestic limited liability company as stated in section 605.1052, Florida Statutes. You may want to explore one of the conversion options. Please return to our website sunbiz.org to download the appropriate form.

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 call (850) 245-6052.

Dil Sultana Regulatory Specialist II

2023 JULIU PH 3

Letter Number: 923A00014272

COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: MMK 2013 LLC			
	sulting Florida Li	Limited Company)	
	_	ization, and fees are submitted to convert an "Other pany" in accordance with s. 605.1045, F.S.	er
Please return all correspondence concerning	ng this matter to	to:	
JASON BODNICK			
(Contact Person)			
MMK 2013 LLC			
(Firm/Company)			
407 SE 4TH AVE			
(Address)			
(City, State and Zip Code)			
DELRAY BEACH, FL 33483			
E-mail Address: (to be used for future annual re	eport notifications	ons)	
For further information concerning this ma	atter, please cal	all:	
JASON BODNICK	at (²⁴⁸	,808.3064	
(Name of Contact Person)		Code) (Daytime Telephone Number)	
Enclosed is a check for the following amo dollars and drawn on a bank located in the		cks processed 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 Fil and Certified (E MO
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	

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 Article MMK 2013 LLC	es of Conversion is:
(Enter Name of Other Business Entity)	,
2. The "Other Business Entity" is a [Enter entity type. Example: corporation, limited partnership, general partnership, commo	
(Enter entity type. Example: corporation, limited partnership, general partnership, commo	n law or business trust, etc.
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, the	name of the country)
DECEMBER 30, 2013	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Artic MMK 2013 LLC	cles of Organization:
(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 9000000000000000000000000000000000000	23. Sec.
	0 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 fisted as, the
5. The plan of conversion has been approved in accordance with all applicable statutes.	5 0
6. The "Converted or Other Business Entity" has agreed to pay any members having apprais	al righte the amount to

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

Signed this 7TH day of JULY	_ 20		
Signature of Authorized Representative of Limi	ted Liability Company:		
Signature of Authorized Representative: Printed Name: JULIE BODNICK	Title: MANAGING MEMBER	-	
Signature(s) on behalf of Other Business Entity:			
Signature:	Title: MANAGING MEMBER	_ -	
Signature:Printed Name:			
Signature:Printed Name:	Title:	- -	
Signature:Printed Name:	Title:	- -	
Signature:Printed Name:	W.)	_	
Signature:Printed Name:	Title:	- -	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Co		****	
If Directors or Officers have not been selected, an Inc		23 J	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:	HASSE HASSE	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	PKIU: 17	
All others: Signature of an authorized person.		* 17	~~~
Fees:			
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the I	imited Liability Company i	S:	
MANAGE DOLONG			
MMK 2013 LLC (N	fust contain the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")	
ARTICLE II - A	ddross		
		principal office of the Limited	Liability Company is:
Principal Office	Address:	Mailing Address:	
407 SE 4TH AVE		SAME	
DELRAY BEACH,	FL 33483		
-			
(The Limited Liability (business entity with ar		ed Office, & Registered Agen distered Agent. You must designate an inc erregistered agent are:	
	JULIE BODNICK		86 MII
	Nar	me	FIL 23 JUL 114 SECRUTATION
	407 SE 4TH AVE		SS
		O. Box NOT acceptable)	257
	DELRAY BEACH	FL 33483	
	City	Zip	?" ¬
liability com registered agent statutes relatir	pany at the place designated t and agree to act in this capa ig to the proper and complete bligations of my position as r	to accept service of process for in this certificate, I hereby accestificate, I hereby accestificate, I further agree to comply the performance of my duties, and registered agent as provided for gnature (REQUIRED)	pt the appointment as with the provisions of al U am familiar with and

(CONTINUED)

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

Name and Address:	
	
DELRAY BEACH, FL 33483	
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	JULIE BODNICK 407 SE 4TH AVE DELRAY BEACH, FL 33483

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.

JULIE BODNICK

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)