# 123000387598

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE
TALLAHASSEE, FL

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## **COVER LETTER**

TO:	New Filing S Division of C						
SHR	IFCT. The T	raveling Rogers, LL	C				
301	JEC1	(Name of Res	sulting Florida Limi	ed Con	npany)		
The o	enclosed Article ness Entity" into	s of Conversion, Artic o a "Florida Limited Li	les of Organizati ability Company	on, an	d fees are submitted to eccordance with s. 605.10	onvert a 45, F.S	m "Other
Pleas	e return all corr	espondence concernin	g this matter to:				
	Alan Roge	rs					
		(Contact Person)		-			
7	he Traveling F	Rogers, LLC		_			
		(Firm√Company)		_			
1936	Bruce B Down:	s Blvd, STE 161		_			
		(Address)					
Wesl	ey Chapel, FL	33544					
trav	elingrogers@gm	City, State and Zip Code)		_			
E-	mail Address: (to b	pe used for future annual re	port notifications)	_			
For f	urther informati	on concerning this ma	tter, please call:				
	Stephanie	Rogers	at (678	'	;-6508		
	(Name of Cont	net Person)	(Area Code	) (Day	ytime Telephone Number)		
Enclo dolla	osed is a check t rs and drawn or	for the following amou a bank located in the	int: (All checks j United States)	proces	sed by this office must be	e payab	le in US
(\$25 f & \$12	50.00 Filing Fees for Conversion 5 for Articles ganization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co		☐\$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 Divis The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite	SECRETARY	2023 AUG 18

## 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.

	Entity)
2. The "Other Rusiness Entity" is a	rs, LLC
2. The "Other Business Entity" is a The Traveling Roge (Enter entity type. Example: corporation, limited part	nership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of (E	Georgia nter state, or if a non-U.S. entity, the name of the country)
09/16/2019	·
(date of organization, formation or incorporation)	
<ol> <li>The name of the Florida Limited Liability Company as The Traveling Rogers, LLC</li> </ol>	s set forth in the attached Articles of Organization:
(Enter Name of Florida Limited Liabilit	y Company)
4. If not effective on the date of filing, enter the effective	date:
(The effective date: Cannot be prior to date of receipt the date this document is filed by the Florida Departm Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	nent of State.)
(The effective date: Cannot be prior to date of receipt the date this document is filed by the Florida Departn Note: If the date inserted in this block does not meet the applicable	nent of State.) statutory filing requirements, this date will not be listed as the

Certificate of Status:

Signed this 17 day of August	20_23
Signature of Authorized Representative of Lin	nited Liability Company:
Signature of Authorized Representative: Man Rogers Printed Name:	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Alan Rowrs Printed Name: Alan Rowrs	Title: Owner
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, of Directors or Officers have not been selected, and	or Officer.
If Florida General Partnership or Limited Liab Signature of one General Partner.	ility Partnership:
If Florida Limited Partnership or Limited Liabi Signatures of <u>ALL</u> General Partners.	ility Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy:	\$25.00 \$125.00 \$30.00 (Optional)

\$5.00 (Optional)

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ARTICLE I - Name:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
The Traveling Rogers, LLC	
(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:
36827 Highland Meadows Ct	1936 Bruce B Downs Blvd, STE 161
Zephyrhills, FL 3354Z	wesley Chapel , FL 33544

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 (egistration.)

The name and the Florida street address of the registered agent are:

Alan F	Rogers
Nai	ne ·
36827 Highland Meadows	Ct
Florida street address (P.	O. Box NOT acceptable)
Zephyrhills	FL 33542
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..

Registered Agent & Signature (REQUIRED)

(CONTINUED)

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

"AMBR" = Manager  MGR		Name and Address:					
(Use attachment if necessary)  CLE V: Other provisions, if any.  REQUIRED SIGNATURE:    Concessioned by	nnager						
(Use attachment if necessary)  The V: Other provisions, if any.  REQUIRED SIGNATURE:  Docusting to by.  Let V: Discussions by.							
(Use attachment if necessary)  REQUIRED SIGNATURE:    DocuSigned by.							
(Use attachment if necessary)  REQUIRED SIGNATURE:    Comparison of a member o		Zephyhills, FL 33542					
(Use attachment if necessary)  REQUIRED SIGNATURE:    DocuStypned by.							
(Use attachment if necessary)  REQUIRED SIGNATURE:    DocuSigned by.     Llaw Rows     Bignature 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 awa any false information submitted in a document to the Department of State constitutes a third degree as provided for in s,817.155, F.S.    Alan Rogers     Typed or printed name of signee     Filing Fees							
(Use attachment if necessary)  REQUIRED SIGNATURE:    DocuSigned by.     Llaw Rows     Bignature 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 awa any false information submitted in a document to the Department of State constitutes a third degree as provided for in s,817.155, F.S.    Alan Rogers     Typed or printed name of signee     Filing Fees							
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\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Qpt)	ormation submitted in a document to for in \$.817.155, F.S.  Ala.  Typed of	or printed name of signee					
O twice control only (alternative)	ormation submitted in a document to for in s.817.155, F.S.  Ala.  Typed of  Tiling Fee for Articles of Or	or printed name of signee					