L 23000402157

(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:
·

Office Use Only



900409730849

05/31/23--01046--018 **155.17



June 19, 2023

ROBERTA MILLS 5454 W 110TH ST OVERLAND PARK, KS 66211 US

SUBJECT: KETO BECKS LLC Ref. Number: W23000085497

We have received your document for and your check(s) totaling \$150.00. 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.

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

KAIN COSTELLO Regulatory Specialist II New Filing Section

6/29/23

Letter Number: 723A00013810

COVER LETTER

10:	New Filing S Division of C				
SUBJ	ECT: Keto Bed	cks LLC			
., 0.00		(Name of Res	sulting Florida Lim	ited Cor	npany)
					nd fees are submitted to convert an "Othe accordance with s. 605.1045, F.S.
Please	e return all corr	espondence concernin	g this matter to:		
Rober	ta Mills				
		(Contact Person)			
Creati	ve Planning Leg	al			
	-	(Firm/Company)			
5454	W. 110th St.				
		(Address)		_	
Overla	and Park, KS 66	211			
	(City, State and Zip Code)		-	
robert	a.mills@creative	planning.com			
E-r	nail Address: (to b	e used for future annual re	port notifications)	_	
For fu	irther informati	on concerning this ma	tter, please call:		
Rober	ta Mills		_at (274-	2925
	(Name of Conta	act Person)	(Area Code	-/ e) (Day	ytime Telephone Number)
		for the following amou a bank located in the		proces	sed by this office must be payable in US
(\$25 fc & \$125	i0.00 Filing Fees or Conversion 5 for Articles anization)	S155.00 Filing Fees and Certificate of Status	☐\$180.00 Filin 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 17		New Divis The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303

Articles of Conversion For Other Rusiness Entiry

"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:

Keto Becks 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
(Enter state, or if a non-U.S. entity, the name of the country)
12/14/2018 on
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Keto Becks 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.

Signed this 27th day of June	_ 20 <u>23</u> .
Signature of Authorized Representative of Limi	ted, Liability Company:
Signature of Authorized Representative: Steples Printed Name: Stephan Wallace	un W. Wallace
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Stephan W. Wallace Printed Name: Stephan Wallace	Tisto: Authorized Person
Signature: Printed Name:	Title
Signature: Printed Name:	Title
Timed Name.	Title.
Signature:Printed Name:	Title
Signature: Printed Name:	Title
Signature:Printed Name:	Title
rimed Name.	1110.
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabili	tv Partnershin
Signature of one General Partner.	<u> </u>
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization: Certified Copy:	\$125.00 \$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nam	ie:		
The name of the Lir	nited Liability Company	/ is:	
Keto Becks LLC			
(Mus	t contain the words "Limited Lie	ability Company, "L.L.C.," or "	LLC.")
ARTICLE II - Add The mailing address		e principal office of the	Limited Liability Company is:
Principal Office A	ddress:	Mailing Address	<u>:</u>
688 Port Charlotte Dr		688 Port Charlotte	Dr.
Ponte Vedra, FL 320	81	Ponte Vedra, FL 32	2081
		ame	
	688 Port Charlotte Dr.	P.O. Box NOT acceptal	He)
	Ponte Vedra	FI 32081	oici
	City	Zip	
liability compo registered agent a statutes relating	iny at the place designate and agree to act in this can to the proper and completing the properties of my position as because the properties of the properti	ed in this certificate, I he pacity. I further agree to ete performance of my d s registered agent as pro	rocess for the above stated limited reby accept the appointment as o comply with the provisions of all luties, and I am familiar with and wided for in Chapter 605, F.S

(CONTINUED)

ARTICLE IV-

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

	of and district in	Name and Address:
"AMBR" = Autho "MGR" = Manage		
MGR – Manage	51	Joseph Beck
<u> </u>		688 Port Charlotte Dr
		Ponte Vedra, FL 32081
MGR		Brittany Beck
		688 Port Charlotte Dr
		Ponte Vedra, FL 32081
	_	
(Use attachment in		
LE V: Other provi	sions, if any.	
LE V: Other provi	sions, if any.	
	sions, if any.	lace
Signatur This document is eany false informatic	Stephan W. Wall rows/oscorous e of a member or a xecuted in accordance v on submitted in a docum	n authorized representative of a member vith section 605.0203 (1) (b), Florida Statutes. I am aware
Signatur This document is cany false informatical provided for in s	Stephan W. Wall rows/oscorous e of a member or a xecuted in accordance v on submitted in a docum .817.155, F.S.	
Signatur This document is eany false informatic	Stephan W. Wall sons, if any. Stephan W. Wall consecuted in accordance von submitted in a docum. 817.155, F.S.	n authorized representative of a member vith section 605.0203 (1) (b), Florida Statutes, I am aware