L23000413049

(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



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COVER LETTER

SUBJECT: Dold Entuprises, LLC. (Name of Resulting Florida Limite	ed Company)	
The enclosed Articles of Conversion, Articles of Organization Business Entity" into a "Florida Limited Liability Company"		
Please return all correspondence concerning this matter to:		
Ne taska Todd (Contact Person)		
(Contact Person)		
Todd Enterprises, UC (Firm/Company)		
12221 Ballentrae Forest Drive (Address)		
RIVENUM, FL 33579 (City, State and Zip Code)		
E-mail Address: (to be used for future simual report notifications)		
For further information concerning this matter, please call:		
Ne +a sha Dodd at (404) (Name of Contact Person) (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)		
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) S150.00 Filing Fees and Certificate of Status S180.00 Filing Fees and Certified Copy and Certified Copy Status		
	Street Address:	
	New Filing Section Division of Corporations	
	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

TO: New Filing Section Division of Corporations

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: Todd Enterprise 5. LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a limited two left 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 <u>FLBY AIG</u> (Enter state, or iva non-U.S. entity, the name of the country)
on 12/11/2009 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Total Enterprises of FL, LLC (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 09.07.7023. (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 07 day of September	_ 20 <u> 23 </u>
Signature of Authorized Representative of Limit	_
Signature of Authorized Representative: MIT Printed Name: Netaska Voda	nsha Dodd Tille: owner
Signature(s) on behalf of Other Business Entity:	
Signature: Mtasha Nodd Printed Name: Netasha Dodd	······
Printed Name: Netasha Doda	Title: Ouner
Signature:Printed Name:	75.1
Printed Name:	Title:
Signature:Printed Name:	Title
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
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

-		
$\sim 11 \sim 1$		
Podd Enterprises	of FL. LLC	
	"Limited Liability Company "L.L.C." or "LLC.")	

ARTICLE II - Address:

ARTICLE I - Name:

The name of the Limited Liability Company is:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
12221 Ballentrae Forast Privile	12221 Ballustral Foxest Drive
Riverview, FL 33579	RIVERNUM, FL 33579

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:

LANDER DUNBAR

Name

2227 42ND STREET SO

Florida street address (P.O. Box NOT acceptable)

ST. PETERSBURGEL 33711

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's-Signature (REQUIRED)

(CONTINUED)

Λ	DT	C	I IF	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 _AMBR_	NATASHA Todd 12221 Ballentral Foxert Drive Riverview, FL 33579		
			
(Use attachment if necessary)			
RTICLE V: Other provisions, if any.			
REQUIRED SIGNATURE: Dodd	<i>'</i>		
This document is executed in accordance wany false information submitted in a document as provided for in s.817.155, F.S.	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that ent to the Department of State constitutes a third degree felony		
Notasha Dodd	ad or printed name of cianos		
Тур	Filing Fees		
\$125.00 Filing Fee for Articles of \$30.00 Certified Copy (Optional	Organization and Designation of Registered Agent 5.00 Certificate of Status (Optional)		
w wood continue cop, (optional	S.		

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF ORGANIZATION

I, Karen C Handel, the Secretary of State and the Corporations Commissioner of the State of Georgia, hereby certify under the seal of my office that

THE DOCTOR'S RETREAT, LLC

a Domestic Limited Liability Company

has been duly organized under the laws of the State of Georgia on 12/11/2009 by the filing of articles of organization in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on December 11, 2009

F 1776

Karen C Handel Secretary of State

Heur Chandel

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Member/Manager, netasha lashay dodd

Control No: 09085214

Date Filed: 12/11/2009 05:09 PM

Karen C Handel

Secretary of State

December 11, 2009

ARTICLES OF ORGANIZATION FOR GEORGIA LIMITED LIABILITY COMPANY

December 11, 2009