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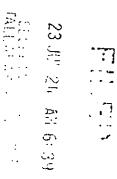
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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TO: New Filing Section

COVER LETTER

Division of C	orporations				
SUBJECT: THE LAN	NORE AGENCY, LLC				
SOBJECT:	(Name of Res	sulting Florida Limited	l Company)		
	s of Conversion, Artic a "Florida Limited Li				i "Other
Please return all corre	espondence concernin	g this matter to:			
SEAN LANORE					
	(Contact Person)				
	(Firm/Company)	<u> </u>			
13182 S VISTA STAT	ION BLVD B216				
	(Address)				
DRAPER, UTAH, 840	20				
((City, State and Zip Code)				
SEAN.LANORESFG@	OUTLOOK.COM				
E-mail Address: (to b	e used for future annual re	port notifications)			
For further informati	on concerning this ma	tter, please call:			
SEAN LANORE		at ()	7261505 (Daytime Telephone N	7. 3	150
(Name of Conta					23
Enclosed is a check f dollars and drawn on	for the following amou a bank located in the	int: (All checks pr United States)	ocessed by this office	ce must be payable	e in ÜS
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing F and Certified Copy	ees	ng Fees,	
Mailing Add	ress:	<u>s</u>	Street Address:		

New Filing Section
Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

New Filing Section
Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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 THE LANORE AGENCY, LLC	Articles of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	, common law or business trust, etc.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. er	itity, the name of the country)
04/11/2023 on	
(date of organization, formation or incorporation)	23 J
3. The name of the Florida Limited Liability Company as set forth in the attached	ed Articles of Organization:
THE LANORE AGENCY, LLC	2
(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 the date this document is filed by the Florida Department of State.)	than 90 calendar days atter
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
5. The plan of conversion has been approved in accordance with all applicable sta	atutes.

- 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 08 day of 23	20_23
Signature of Authorized Representative of Li	•
Signature of Authorized Representative: Star Printed Name: SEAN LANORE	n la Nore Title: CEO/MANGER
Signature(s) on hehalf of Other Business Entity	
(
Signature: Scan La More Printed Name: SEAN LANORE	Title: CEO/MANGER
Signature: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, If Directors or Officers have not been selected, an	
If Florida General Partnership or Limited Lial Signature of one General Partner.	pility Partnership:
If Florida Limited Partnership or Limited Liab Signatures of ALL General Partners.	oility 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 n: \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Co	mpany is:
THE LANORE AGECNY, LLC	
(Must contain the words "Lit	mited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	s of the principal office of the Limited Liability Company is:
	s of the principal office of the Limited Liability Company is: Mailing Address:
The mailing address and street addres	
The mailing address and street addres Principal Office Address:	Mailing Address:

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

business entity with an active Florida registration.)

SEAN LANORE		23.	
	Name		
1120 E TWIGGS ST, B	2	-	
Florida street address	s (P.O. Box NOT acceptable)		
TAMPA FL 33602		<u>රු</u> නිදි යු	-
City	Zip	7,44	

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..

Scan La Norc

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager	SEAN LANORE	
MGR	1120 E TWIGGS ST, B517	
		
	TAMPA, FL, 33602	-
		
		
		
		.
		
		
(1)		
(Use attachment if necessary)	<u>-</u> -1	
	No. Para Para	% 23
FIGURE V. Other provisions, if any	<u>'</u>	
FICLE V: Other provisions, if any.		. 17
		T. 27
		• •
DECHIDED SIGNATURE.		. ල. දිය ය
<u>REQUIRED SI</u> GNATURE:		36
Sean la Nore		-

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.

SEAN I	LANORE
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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)