# L23000422573

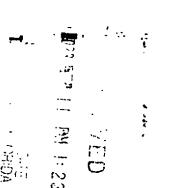
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



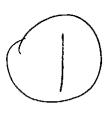
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# Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724



OATE 09/11/2023		
		⇔WALK IN
ENTITY NAME Glanz H	oldings, LLC	
DOCUMENT NUMBER_		
	**PLEASE FILE THE ATTACHED AND RET	TURN**
	Plain Copy	
XXXXXXX	Certified Copy	
	Certificate of Status	
**/	LEASE OBTAIN THE FOLLOWING FOR THE ABO	OVE ENTITY**
	Certified Copy of Arts & Amendments	
	Certificate of Good Standing	
	**APOSTILLE' / NOTARIAL CERTIFICA	1710N**
COUNTRY OF DESTINAT	TON	<u></u>
NUMBER OF CERTIFICA	TES REQUESTED	
TOTAL OWED \$180		T #: I20160000072
	5	R FM

Please call Tina at the above number for any issues or concerns. Thank you so much!

### **Articles of Conversion**

For

# "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.

(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation limited partnership, general partnership, common law or business trust, etc.
(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)
05/02/2006
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:
Glanz Holdings, 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.

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	LLC	
		bility Company, "L.L.C.," or "LLC.")
ARTICLE II -	Address:	
The mailing add	lress and street address of th	principal office of the Limited Liability Company
Principal Offic	e Address:	Mailing Address:
222 Royal Palm W	'ay'	222 Royal Palm Way
		······································
Palm Beach, FL 2  ARTICLE III - (The Limited Liability		red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
Palm Beach, FL 2  ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Register Company cannot serve as its own R an active Florida registration.)  The Florida street address of the server as the server address of the server addr	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:
Palm Beach, FL 2  ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Register Company cannot serve as its own R an active Florida registration.)  The Florida street address of the Corporate Creations Network	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:
Palm Beach, FL 2  ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Register Company cannot serve as its own R an active Florida registration.)  The Florida street address of the Corporate Creations Network	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are: rk Inc.
Palm Beach, FL 2  ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Register Company cannot serve as its own R an active Florida registration.)  The Florida street address of the Corporate Creations Network National Science	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are: rk Inc.
Palm Beach, FL 2  ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Register Company cannot serve as its own R an active Florida registration.)  The Florida street address of the Corporate Creations Network National Science	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are: rk Inc. me

d llstatutes 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..

> /s/ Caitlin Lazarus Caitlin Lazarus, Special Secretary Registered Agent's Signature (REQUIRED)

> > (CONTINUED)

Signed this day of _September	<u> 2023</u> .
Signature of Authorized Representative of Lin	nited Liability Company:
Signature of Authorized Representative:	Title: Manager
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Signature: Elliot Glanz	Title: Director
Signature:Printed Name:	Title:
Signature: Printed Name:	
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 In	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	
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: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

### ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	Andrew Glanz
MOIX	PO Box 937
	Stowe, VT 05672
	<u></u>
	<u> </u>
(Use attachment if necessary)	
( • • • • • • • • • • • • • • • • • • •	
·	
LE V: Other provisions, if any.  REQUIRED SIGNATURE:	Tulow My
LE V: Other provisions, if any.  REQUIRED SIGNATURE:	redrew Gy
Signature of a member or an This document is executed in accordance with	authorized representative of a member th section 605.0203 (1) (b), Florida Statutes. I am aware at to the Department of State constitutes a third degree fe
Signature of a member or an This document is executed in accordance wit any false information submitted in a document as provided for in s.817.155, F.S.	authorized representative of a member th section 605.0203 (1) (b), Florida Statutes. I am aware
Signature of a member or an This document is executed in accordance wit any false information submitted in a document as provided for in s.817.155, F.S.  Andrew Glanz, Manager	authorized representative of a member th section 605.0203 (1) (b), Florida Statutes. I am aware at to the Department of State constitutes a third degree fe
Signature of a member or an This document is executed in accordance wit any false information submitted in a document as provided for in s.817.155, F.S.  Andrew Glanz, Manager	authorized representative of a member th section 605.0203 (1) (b), Florida Statutes. I am aware
Signature of a member or an This document is executed in accordance wit any false information submitted in a document as provided for in s.817.155, F.S.  Andrew Glanz, Manager Typeo	authorized representative of a member th section 605.0203 (1) (b), Florida Statutes. I am aware at to the Department of State constitutes a third degree fe
Signature of a member or an This document is executed in accordance wit any false information submitted in a document as provided for in s.817.155, F.S.  Andrew Glanz, Manager Typeo	authorized representative of a member th section 605.0203 (1) (b), Florida Statutes. I am aware at to the Department of State constitutes a third degree fe for printed name of signee Filing Fees Organization and Designation of Registered