# L23000440579

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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### **COVER LETTER**

<b>TO:</b> New Filing Section Division of Corpora	ations			
Thallo LLC				
SUBJECT:	(NIama of Day	for the country		
	(Name of Rest	ilting Florida Lim	ited Con	npany)
The enclosed Articles of Co Business Entity" into a "Flo	onversion, Article orida Limited Lia	es of Organizat Ibility Compan	ion, an y" in ac	d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all correspond	lence concerning	this matter to:		
Virginia Davito				
(Con	tact Person)		_	
(Firm 1314 E Las Olas Blvd #2204	√Company)		_	
	Address)		<del>-</del>	
Fort Lauderdale, FL 33301				
(City, Sta gdavito@thalloevents.com	te and Zip Code)		-	
E-mail Address: (to be used for	or future annual repo	ort notifications)	-	
For further information con-	cerning this matte	er inlease call:		
Ginny Davito	-	954 at (	648-50	004
(Name of Contact Perso	n)	(Area Code)	(Dayı	time Telephone Number)
Enclosed is a check for the f dollars and drawn on a bank	ollowing amoun located in the U	t: (All checks p nited States)	orocess:	ed by this office must be payable in US
		□\$180.00 Filing and Certified Cop		\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporat P.O. Box 6327 Tallahassee, FL 3231			New F Division The Co	Address:  Tiling Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

# **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 Thallo, LLC	of the Articles of Conversion is:
(Enter Name of Other Business Entity) Thallo, LLC	<u></u> .
2. The "Other Business Entity" is a	
2. The "Other Business Entity" is a	nership, 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)
March 15, 2017	
on .	
on	
3. The name of the Florida Limited Liability Company as set forth in the a Thallo. LLC	ttached Articles of Organization:
(Enter Name of Florida Limited Liability Company)  July14, 202	
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 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 required document's effective date on the Department of State's records.	•
5. The plan of conversion has been approved in accordance with all applica	ble statutes.
<ol> <li>The "Converted or Other Business Entity" has agreed to pay any members h which such members are entitled under ss. 605.1006 and 605.1061-605.107</li> </ol>	
	2022 JUL 24
	<u>-</u>
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	•
Signed this 14 day of Jul	
Signature of Authorized Repre	esentative of Limited Liability Company:
Signature of Authorized Represe Printed Name: Virginia Davito	entative: Title: Managing Member
Signature(s) on behalf of Other	Business Entity: [See below for required signature(s)]
Signature:	
Printed Name Viginia Davito	Title: Founder - Member
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature: Printed Name:	Title:
<u></u>	
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chair	
If Directors or Officers have not be	een selected, an Incorporator must sign.
If Florida General Partnershin o	or Limited Liability Partnership:
Signature of one General Partner.	
If Florida Limited Doutnowhin a	and imited I inhibited I imited Daytoneching
Signatures of ALL General Partne	or Limited Liability Limited Partnership: ers.
_	
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion	\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Fees for Florida Articles of Organization:

Certified Copy: Certificate of Status:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
Thallo, LLC	0 41.0 2 41.0 2	
(Must contain the words "Limited Liabilit	y Company, "L.L.C., "or "L.L.C.")	
ARTICLE II - Address:		
The mailing address and street address of the pr	rincipal office of the Limited Lia	bility Company is:
Principal Office Address:	Mailing Address:	
1314 E Las Olas Blvd #2204	1314 E Las Olas Blvd. #2204	
Fort Lauderdale FL 33301	Fort Lauderdale, FL 33301	<del></del>
ARTICLE III - Registered Agent, Registered		
(The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	tered Agent. You must designate an individ	iual or another
values chary war at terre i forest registation,		
The name and the Florida street address of the r	egistered agent are:	
Virginia Davito		
Name		
Halliv	<u></u>	
1313 Briney Ave #1111 Ave	889	
Florida street address (P.O	. Box NOT acceptable)	
Pompano Beach	220.0	
· · · · · · · · · · · · · · · · · · ·	FL 33062 Zip	
City	Zip	
Having house was also remise and a sount and to	a account assertion of manages for the	, above stated limited
Having been named as registered agent and to liability company at the place designated in		
registered agent and agree to act in this capac		
statutes relating to the proper and complete p		
accept the obligations of my position as reg	gistered agent as provided for in (	Chapter 605, F.S
		_
	/	2022
	onk (DEOLUDED)	ين ل
Registered Agent's Sign	nature (KEQUIKED)	, 5
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(CONTIN	UED)	<u> </u>
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ARTICLE IV-

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

· . .: .

	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
<del></del>	Virginia Davito
	Vilgilia Davilo
MGR	1314 E Las Olas Blvd #2203
	Fort Lauderdale FL 33301
	· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary)	
LE V: Other provisions, if any.	
CLE V: Other provisions, if any.  REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	or an authorized representative of a member
Signature of a member	or an authorized representative of a member nee with section 605.0203 (1) (b). Florida Statutes. I am away ocument to the Department of State constitutes a third degree
Signature of a member of This document is executed in accorda any false information submitted in a document as provided for in s.817.155, F.S.	nce with section 605.0203 (1) (b), Florida Statutes. I am away ocument to the Department of State constitutes a third degree
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Signature of a member of any false information submitted in a do as provided for in s.817.155, F.S.  Vir. G.1 NIA  \$125.00 Filing Fee for Article	Typed or printed name of signee  Filing Fees  Solution (1) (b), Florida Statutes, I am away occurrent to the Department of State constitutes a third degree of the Department of State constitutes a third degree
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Signature of a member of a member of a member of a member of any false information submitted in a dot as provided for in s.817.155, F.S.  Vir GINIA  \$125.00 Filing Fee for Article	Typed or printed name of signee  Filing Fees  Solution (1) (b), Florida Statutes, I am away occurrent to the Department of State constitutes a third degree of the Department of State constitutes a third degree