L23000472451

(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:





500416922815

10/11/23--01030--009 **180.00



COVER LETTER

TO: New Filing Sec Division of Co				
SUBJECT: PMK & SO	NS L.L.C.			
		ulting Florida Lim	ited Con	npany')
				d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corres	spondence concerning	g this matter to:		
Anthony Morales				
77 77 78 78 7	(Contact Person)		_	
MyUSACorporation.com				
	(Firm/Company)			
1 Radisson Plaza, Suite	800			
	(Address)		_	
New Rochelle, NY 1080	1			
(Ci	ty. State and Zip Code)			
info@myusacorporation.	com			
E-mail Address: (to be	used for future annual re	port notifications)	_	
For further information	n concerning this ma	tter, please call		
Anthony Morales		_at (<u>877</u>	330)-2677
(Name of Contact	Person)		e) (Day	rtime Telephone Number)
Enclosed is a check fo dollars and drawn on a			process	sed by this office must be payable in US
(\$25 for Conversion	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 Addre New Filing Sec Division of Co P.O. Box 6327 Tallahassee, Fl	rtion rporations		New I Divisi The C	t Address: Filing Section ion of Corporations Centre 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 of the Articles of Conversion is: PMK & SONS L.L.C.
(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
01/25/2013 on
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
PMK & SONS L.L.C.
(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.)
<u>Note:</u> 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.

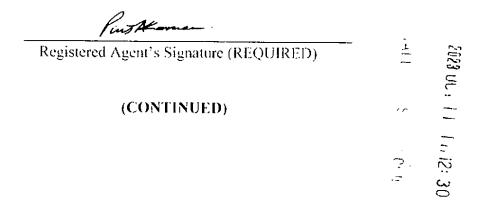
	,
Signed this 3rd day of October	20 <u>23</u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Pius Kamau	Title: Member
Signature(s) on behalf of Other Business Entity:	
Signature: Pius Kamau Printed Name: Pius Kamau	
Printed Name: Pius Kamau	Title: Member
Signature: Printed Name:	Title:
Signature: Printed Name:	Tills
Timed Name.	
Signature:	-
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Sionature:	
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	Officer.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Com	pany is:
PMK & SONS L.L.C.	
(Must contain the words "Limit	ted Liability Company, "L.E.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2805 Veronia Dr #109	2805 Veronia Dr #109
Palm Beach Gardens, FL 33410	Palm Beach Gardens, FL 33410
ARTICLE. III - Registered Agent, Re (The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
The name and the Florida street address	of the registered agent are:
Dius Komau	

Pius Kamau	
Nar	ne
2805 Veronia Dr #109	
Florida street address (P.	O. Box <u>NOT</u> acceptable)
Palm Beach Gardens	FL 33410
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.



ARTICLE IV-

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

"AAAIDD" = A A_{i} with a A_{i} A_{i} A_{i} A_{i} A_{i}	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR	Pius Kamau
T. C.	2805 Veronia Dr #109
	Palm Beach Gardens, FL 33410
	Tami Bodon Odrons, 1 E 00410
	*
	······································
(Use attachment if necessary)	
vose attachment if necessary)	
•	
•	
LE V: Other provisions, if any.	2
LE V: Other provisions, if any.	ut Kamer.
LE V: Other provisions, if any.	ns Kamer.
LE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, Lam aware
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document in submitted i	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware ment to the Department of State constitutes a third degree fe
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REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Pius Kamau Ty	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree ferped or printed name of signee Filing Fees
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Pius Kamau Ty	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree fer ped or printed name of signee Filing Fees of Organization and Designation of Registered.