# L23000477922

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Sertificates of States
Special Instructions to Filing Officer.
1
ļ. <b>.</b>





400414825694

09/06/23--01020--026 ++185.00

(128 SE) = 6 FG[1: 22

#### COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: YFB Lh()	
(Name of Resulting Florida Limi	ted Company)
The enclosed Articles of Conversion, Articles of Organizati Business Entity" into a "Florida Limited Liability Company	ion, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:	
Refer A Edilch  (Contact Person)  FB LhC  (Firm/Company)  TILL SW 9th St.  (Address)  Permbroue Pines, For (City, State and Zip Code)  Line State and Zip Code)  E-mail Address: (to be used for future annual report notifications)	C 33023
For further information concerning this matter, please call:    Poly A College at (954-) (Name of Contact Person) (Area Code)    Enclosed is a check for the following amount: (All checks provided in the contact Person) (All checks provided in the contact Person)	(Daytime Telephone Number)  occessed by this office must be payable in US
dollars and drawn on a bank located in the United States)	of the office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  \$155.00 Filing Fees and Certificate of Status  \$180.00 Filing Fees and Certificate of Status	Ces X\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	treet Address:  lew Filing Section  livision of Corporations he Centre of Tallahassee  415 N. Monroe Street, Suite 810 allahassee, FL 32303

## 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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
YEB GOLDOGHOV
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Floreda
(Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
(Enter Name of Florida Limited Liability Company)
(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 on the
The wave this decament is fitted by the ringing Honoremone of Cana \
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.
1 ' ' '

Signed this 1st day of Splember 2023
Signature of Authorized Representative of Limited Liability Company:
Signature of Authorized Representative:  Printed Name: Refer A Chrich Title: ANGR
Signature(s) on behalf of Other Business Entity:   See below for required signature(s)
Signature: Peley A. Chlich Title: Pendon/Directer
Signature: Title: WEST don't Directed
Signature: Printed Name:
Signature: Title:
Title:
Signature: Printed Name:
Signature:
Signature: Title:
Signature:
Signature: Title:
If Florida Corporation:
Signature of Chairman. Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.
All others: Signature of an authorized person.
ees:

\$25.00

\$125.00

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

Articles of Conversion:

Certified Copy:

Certificate of Status:

Fees for Florida Articles of Organization:

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
YFB LLC		
(Must contain the words "Limited Liability Com	pany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the princip	al office of the Limited Liabilit	y Company is:
Principal Office Address:	ailing Address:	
7111 SW QLASI	MILSINALA S	1
	Rembroke lines, A	= 33023
ARTICLE III - Registered Agent, Registered Offi (The Limited Liability Company cannot serve as its own Registered A business entity with an active Florida registration.)	ice, & Registered Agent's Sign gent. You must designate an individual or	nature: another
The name and the Florida street address of the registe	ered agent are:	
Peder A EL	rlich	
Pedes A Els Name 7111 SW 94h	31.	
Florida street address (P.O. Box		
Remposure Pross	22/13	
Pembrouse Pines F	Zip	
Having been named as registered agent and to accelliability company at the place designated in this cregistered agent and agree to act in this capacity. If statutes relating to the proper and complete performance accept the obligations of my position as registered.	certificate, I hereby accept the ap further agree to comply with the mance of my duties, and I am fai	ppointment as provisions of all miliar with and
Clor of C	<del>-</del>	20
Registered Agent's Signature	(REQUIRED)	20 <b>29</b> SEr
(CONTINUED)	;	
(50.1211.0000)		Ξ.
		II: 22
	<del>.</del>	22

Title:	Name and Adduse
"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	2/2 2 2/1
_MGR_	rever the Enrich
	Palach SW 94h St.
	Pembrone Pines, FC 3302
	· <del></del>
•	
(Use attachment if necessary)	
(Use attachment if necessary)	
LE V: Other provisions, if any.	For which this LLC 5 or than
LEV: Other provisions, if any.	for which this LLC 6 guthor manager
LEV: Other provisions, if any.  rpose - The pur pose of motel, hospitality	for which this LLC & author, real estate, property managen
LEV: Other provisions, if any.	for which this LLC & author, real estate, property managen
LEV: Other provisions, if any.  rpose - The pur pose of motel, hospitality	for which this LLC to author, rail estate, property managen
LEV: Other provisions, if any.  rpose - The pur pose of motel, hospitality	for which this LLC to guthor, malestate, property managen
LE V: Other provisions, if any.  Prose - The Puc pose ( Motel, hospitality  REQUIRED SIGNATURE:  Signature of a member or a	neal estate, property managen
LE V: Other provisions, if any.  Proje - The Pug pose of Motel, hospitality  REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance wany false information submitted in a document of the submitted in a document of th	n authorized representative of a member
LE V: Other provisions, if any.  Provided for in a S17 155 E.C.  LE V: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or a  This document is executed in accordance wany false information submitted in a document as provided for in a S17 155 E.C.	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 felon
LE V: Other provisions, if any.  CPOSE - The PUG POSE A  MOSPI GILLY  REQUIRED SIGNATURE:  Signature of a member or a  This document is executed in accordance wany false information submitted in a document as provided for in a \$17,155 E.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 felon
LE V: Other provisions, if any.  CPOSE - The PUG POSE A  Mospi Gliff  REQUIRED SIGNATURE:  Signature of a member or a  This document is executed in accordance wany false information submitted in a document as provided for in a \$17,155 Fig.	neal estate, property managen

ARTICLE IV-