L23000508235

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Oertificates of Status			
Special Instructions to Filing Officer:			
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September 19, 2023

GEDAM GEBREMICHAEL GYC PROGRAMS LLC 9450 SW GEMINI DR #64243 BEAVERTON, OR 97008 US

SUBJECT: GYC PROGRAMS LLC Ref. Number: W23000128186

We have received your document for GYC PROGRAMS LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Signature(s) on behalf of Other Busibess Entity is missing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Dil Sultana Regulatory Specialist III

Letter Number: 523A00021685

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 GNC Programs 44C	s of Conversion is:
(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 <u>California</u> (Enter state, or if a non-U.S. entity, the n	ame of the country)
on 9 30 2022 (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articl	es of Organization:
GYC Programs LLC (Enter Name of Florida Limited Liability Company)	·
4. If not effective on the date of filing, enter the effective date: 07/15/2023. (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 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 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 appraisa	2023 (
 The "Converted or Other Business Entity" has agreed to pay any members having appraisa which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. 	
	MID: C

Signed this 14th day of July	20 <u>23</u>
Signature of Authorized Representative of	
	H A
Signature of Authorized Representative:	
Signature of Authorized Representative:	Title: CEO / ANBIZ
Signature(s) on behalf of Other Business Enti	ity: [See below for required signature(s)]
Signature:	
Signature:	Title: CED
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director	r, or Officer.
If Directors or Officers have not been selected, a	an Incorporator must sign.
If Florida General Partnership or Limited Li	ability Dautagrabia.
Signature of one General Partner.	ability Partnership:
organizate of one General Partitely	
If Florida Limited Partnership or Limited Li	ability Limited Partnership:
Signatures of ALL General Partners.	
All others	
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:

WILLY COLL TO THE COLL TO THE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:			
GYC Programs LLC (Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Lial	bility Compa	ıny is:
Principal Office Address:	Mailing Address:		
382 NE 1915+ St # 49469 Miami, FL 33179	9450 SW Amini Dr Prewarton, 02 97008	_#64243 :	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the re Gedam Gelocemic Name	Office, & Registered Agent's street Agent. You must designate an individu	Signature:	2 2 2 2 1
The name and the Florida street address of the re	gistered agent are:	- 12 / 12 / 12 / 12 / 12 / 12 / 12 / 12))
<u> Gedam Gebremic</u>	she!		:
Name		, <u>, , , , , , , , , , , , , , , , , , </u>	. '
60 SW 13th St	- #5211	::: <i>i</i> ;	1
Florida street address (P.O.	Box NOT acceptable)	- 6	
Migmi	FL 33120		
<u>Miami</u> City	Zip		
Having been named as registered agent and to liability company at the place designated in tregistered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as reginal Registered Agent's Signa	this certificate, I hereby accept the y. I further agree to comply with erformance of my duties, and I an stered agent as provided for in C	he appointme h the provision m familiar wi	nt as ns of ali th and

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMPA	Gedom Gebrenichoel 9450 SW Remini Dr #64243 Beauerton, OR 97008
	<u> </u>
(Use attachment if necessary)	
ΓΙCLE V: Other provisions, if any.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
REQUIRED SIGNATURE:	
This document is executed in accordance v	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that the Department of State constitutes a third degree felon
<u>Gedam Geloremi</u>	chre!
1 ур	ped 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)