L23000525956

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

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11/21/23--01006--005 **150.00



COVER LETTER

TO: New Filing S Division of O				
SUBJECT: WINDSO	OR 4214 LLC			
5005001,		sulting Florida Limi	ted Con	npany)
				d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:		
JUAN BRICENO LEOI	N			
	(Contact Person)		_	
WINDSOR 4214 LLC				
	(Firm Company)		-	
17314 SW 41st STRE	ET			
	(Address)		•	
MIRAMAR, FL 33029				
(City, State and Zip Code)		-	
documents@cyancinc	.com			
E-mail Address: (to I	oe used for future annual re	port notifications)	-	
For further informati	ion concerning this ma	tter, please call:		
JUAN BRICENO LEO	٧	786 at (878-3	296
(Name of Cont	act Person)		(Day	time Telephone Number)
	for the following amou a bank located in the		rocess	ed by this 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 and Certified Cop		□\$185.00 Filing Fees. Certified Copy, and Certificate of Status
<u>Mailing Add</u> New Filing S				Address: Tiling Section
Division of C	Corporations		Divisi	on of Corporations
P.O. Box 632				entre of Tallahassee
Tallahassee.	F1, 32314		24153	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.

WINDSOR 4214 LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(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)
08/08/2023 On
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: WINDSOR 4214 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.

Signed this 9th	day of NOVEMBER	20	23	<u> </u>	
Signature of Auth	orized Representative of Lim	ited Li:	ability (Company	<u>v:</u>
Signature of Author	rived Representatives Just -				
Printed Name: JUAN	rized Representative: Konfile BRICENO LEON	Title	: AMBR		-
Signature(s) on bel	nalf of Other Business Entity:	See be	low for	required	signature(s)]
Sionature:					
Printed Name: JUAN	BRICENO LEON	Title	: AUTHO	ORIZED PE	RSON
Signature:		**** 1			
Printed Name:		little	:		
Signature:					
Printed Name:		Title	:		
C:					
Signature: Printed Name:		Tida	•		
Trimed (viiite)	·	11110	• ——		
Signature:					
Printed Name:		Title	:		
Signature					
Printed Name:		Title	:		
If Florida Corporal		(1)16			
	an, Vice Chairman, Director, or ers have not been selected, an In			t sion	
		e con promo		5	
	<u>Partnership or Limited Liabili</u>	<u>ty Part</u>	<u>nership</u>	<u>:</u>	
Signature of one Ger	neral Partner.				
If Florida Limited		ty Limi	ted Par	tnership:	<u>:</u>
Signatures of ALL (-; -,,,,			•
<u>All others:</u> Signature of an auth	arizad naman				
orginature of an attin	orizea person,				
Fees:					
Articles of C	'onversion:	\$25.0)()		
Fees for Flo	rida Articles of Organization:	\$125.			
Certified Co			0 (Opti		
Certificate o	of Status:	\$5.00	F(Option	nal)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N			
The name of the	Limited Liability Com	ipany is:	
WINDSOR 4214 L	LC		
C	Must contain the words "Limi	ted Liability Company, "L.L.C.," or "LLC")	
ARTICLE II - A The mailing addr		of the principal office of the Limite	d Liability Company is:
Principal Office	Address:	Mailing Address:	
4214 LANA AVE		17314 SW 41st STREET	
DAVENPORT, FL	33897	MIRAMAR, FL 33029	
US		<u>us</u>	
The name and the	e Florida street address JUAN BRICENO LEC	s of the registered agent are: Name	
	17314 SW 41st STRE	• • • • • • • • • • • • • • • • • • • •	
	Florida street addr	ess (P.O. Box <u>NOT</u> acceptable)	
	MIRAMAR	l ⁻¹ . 33029	
	City	Zip	
liability con registered agen statutes relati	ipany at the place designt and agree to act in thing to the proper and coubligations of my position. Registered Agen	ent and to accept service of process for gnated in this certificate. I hereby active capacity. I further agree to composite performance of my duties, as on as registered agent as provided for the service of the servi	cept the appointment as ly with the provisions of all nd I am familiar with and
	(C	ONTINUED)	· 2

ARTICLE IV-

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

AMBR" = Authorized Member	
MGR" = Manager	
AMBR	JUAN BRICENO LEON
	17314 SW 41st STREET
	MIRAMAR, FL 33029
	
Use attachment if necessary)	
E.V. Othar provisions if any	
E V: Other provisions, if any. REQUIRED SIGNATURE:	<i>i</i> .
	Kunf
Signature of a member or	an authorized representative of a member e with section 605,0203 (1) (b). Florida Statutes, I am awa ament to the Department of State constitutes a third degree
Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155, F.S. JUAN BRICENO LEON	e with section 605,0203 (1) (b). Fforida Statutes, I am awa iment to the Department of State constitutes a third degree
Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155, F.S. JUAN BRICENO LEON	e with section 605 0203 (1) (b). Florida Statutes, Lam awa

STATE OF WYOMING Office of the Secretary of State

I, CHUCK GRAY. Secretary of State of the State of Wyoming, do hereby certify that the filing requirements for the issuance of this certificate have been fulfilled.

CERTIFICATE OF ORGANIZATION

Windsor 4214 LLC

I have affixed hereto the Great Seal of the State of Wyoming and duly executed this official certificate at Cheyenne, Wyoming on this 8th day of August, 2023 at 6:18 PM.

Remainder intentionally left blank.



Filed Date: 08/08/2023

Secretary of State

Filed Online By:

Cheyenne Moseley

on 08/08/2023

121 No. 21 Fr 2: