# 23600530002

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(======================================
***************************************
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Office.
Special Instructions to Filing Officer.

Office Use Only



08/31/23--01001--012 \*\*150.00

2023 HAY 31 PM 4: 31

### **COVER LETTER**

<b>TO:</b> New Filing Section Division of Corporations	
SUBJECT: Variety Luxe Vending LLC	
	of Resulting Florida Limited Company)
The enclosed Articles of Conversion, a Business Entity" into a "Florida Limit	Articles of Organization, and fees are submitted to convert an "Other ed Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence conce	erning this matter to:
Tiaunte' Diggs	•
(Contact Person)	
(Firm/Company)	
2615 Fletcher st (Address)	
Hollywood, FL 33020	
(City, State and Zip Cottaunte_diggs@me.com	ode)
E-mail Address: (to be used for future ann	ual report notifications)
For further information concerning thi	s matter, please call:
Tiaunte' Diggs	at (469) <sup>662-3054</sup>
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following a dollars and drawn on a bank located in	amount: (All checks processed by this office must be payable in US the United States)
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  □ \$155.00 Filing F and Certificate of Status	Fees
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Conversion For "Other Business Entity" Into

### Florida Limited Liability Company

HAY 31 PM 4: 31
RETARY OF STATE

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: Variety Luxe Vending INC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation  (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)
03/01/20223 on
On
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Variety Luxe Vending 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 <u>09</u> day of <u>May</u>	20	
Signature of Authorized Representative	ve of Limited Liability Company:	
Signature of Authorized Representative: Printed Name: Tiaunte' Diggs	Title: Member	
	s Entity: [See below for required signature(s)]	
Signature: Printed Name Tiaunte' Diggs	Title: Incorporator	
Printed Name:	Title:	
Signature: Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, D If Directors or Officers have not been selected.		
If Florida General Partnership or Limit Signature of one General Partner.	ted Liability Partnership:	8
If Florida Limited Partnership or Limit	ed Liability Limited Partnership	1023 A
Signatures of <u>ALL</u> General Partners.	the Line of the later of the la	73
All others: Signature of an authorized person.	; ; ;	PM 4:31
Fees:	·	3/F
Articles of Conversion: Fees for Florida Articles of Organ Certified Copy: Certificate of Status:	\$25.00 nization: \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Variety Luxe Vending LLC	
	ited Liability Company, "L.L.C.," or "LLC.")
`	,
ARTICLE II - Address:	
The mailing address and street address	of the principal office of the Limited Liability Company
J	
Principal Office Address:	Mailing Address:
2615 Fletcher St	2615 Fletcher St
2615 Fletcher St Hollywood, FL	2615 Fletcher St Hollywood, FL
<del> </del>	
Hollywood, FL	Hollywood, FL
Hollywood, FL 33020	Hollywood, FL 33020
Hollywood, FL 33020 ARTICLE III - Registered Agent, R	Hollywood, FL

Tiaunte' Diggs		S
	Name	2023 HA FECRE /
2615 Fletcher St		TEN 7 17
Florida street addres	s (P.O. Box <u>NOT</u> acceptable)	ASS.
Hollywood	FL 33020	T'S R M
City	Zip	71A7 K: 3

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Damon Diggs
	2615 Fletcher St
	Hollywood, FL 33020
	<del></del>
	HAR 3
•	——————————————————————————————————————
	THE STATE OF
(Use attachment if necessary)	JIE LIE
,	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
Signature of a member or a	an authorized representative of a member
Signature of a member or a This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware that
Signature of a member or a This document is executed in accordance any false information submitted in a docur	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony
Signature of a member or a This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware that

Typed 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)