123000535193

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entry Hame)
(Document Number)
Certified Copies Certificates of Status
<u> </u>
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COVER LETTER

	ew Filing S ivision of (Section Corporations					
SUBJEC	T: TWO M	HLLC					
			sulting Florida Li	nited Co	mpany)		
business	Entity into	o a "Florida Limited L	nability Compa	ny" in a	nd fees are submitted taccordance with s. 605	to convert 5.1045, F.:	an "Other S.
Please ret	um all con	respondence concerni	ng this matter to):			
Marc J He	erling						
		(Contact Person)	· · · · · · · · · · · · · · · · · · ·	_			
TWO MH	LLC						
	•	(Firm Company)		_			
11112 Sw	eet Sage Av	/enue					
	_	(Address)					
Boynton B	each, FL 33	3473					
		City, State and Zip Code)	-				
	LC@gmall.c						
E-mail A	Address: (to b	be used for future annual re	port notifications)				
For furthe	r informati	on concerning this ma	itter, please call	:			
Marc J He	rling		at (732	, 861-	7870		
(N	ame of Conta	ict Person)	_ ` `	e) (Day	rtime Telephone Number)		
Enclosed i	is a check f d drawn on	for the following amou a bank located in the	int: (All checks United States)	process	sed by this office must	t be payab	ole in US
\$150.00 (\$25 for Cor & \$125 for a of Organizat	iversion Articles	□S155.00 Filing Fees and Certificate of Status	S180.00 Filin and Certified Co		S185.00 Filing Fees, Certified Copy, and Certificate of Status	, ·	L -3
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Ne Div P.C	w Filing S	ection orporations 7		New I Divisi The C			

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.

(Enter Name of Other Business Entity)	 -
2. The "Other Business Entity" is a LLC	
(Enter entity type. Example: corporation, limited partnership, general partnership, comm	mon law or business trust, etc.
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, t	he name of the country)
03-02-2021 on	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Lines of	
3. The name of the Florida Limited Liability Company as set forth in the attached Ar TWO MH LLC	ticles of Organization:
(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 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 stanutory filing provincements, this dis	
(The effective date: Cannot be prior to date of receipt or filed date nor more than 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 starutory filing requirements, this didocument's effective date on the Department of State's records.	ate will not be listed as the
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Signed this 13 day of November	20 <u>.23</u>
Signature of Authorized Representative of Lin	
con on the same of	TII () ()
Signature of Authorized Representative:	cof Herhalf
Printed Name: Marc J Herling	//Title: Managing Member
Signature(s) on behalf of Other Business Entity:	· · · · · · · · · · · · · · · · · · ·
Signature: William Hail	
Printed Name: Marc J.Herling	Title: Managing Member
Signature: Printed Name:	
Printed Name:	Title:
Signature:Printed Name:	77.1
	1 ttle:
Signature:	
Signature:Printed Name:	Title
0:	
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Tide
	IIIC:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	to I impland Done on the
Signatures of ALL General Partners.	tv Limited Partnership:
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$25.00
Certified Copy:	\$125.00 \$30.00 (Ontional)
Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)
	SULTO (Optional)

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

			DEATT COMPANY
ARTICLE I - N			
The name of the	Limited Liability Company	y is:	•
	· •		
TWO MH LLC			
	Must contain the week of the test		
1.	erusi contain the words "Limited Lig	obility Company, "L.L.C.," or "LLC.")	— —
ARTICLE II - A	Address:		
The mailing addi	ress and street address of the	e principal office of the Limite	ed Liability Company ic-
			d Didonity Company is.
Principal Office	Address:	Mailing Address:	
11112 Sweet Sage	e Avenue		
Boynton Beach, F	L 33473	11112 Sweet Sage Avenue	
<u> </u>		Boynton Beach, FL 33473	
			
ARTICLE III -	Registered Agent, Registe	red Office, & Registered Age	41 Et4
		egistered Agent. You must designate an	individual or another
business entity with B	n active Florida registration.)	3	
The name and the	Florida street address of th	ne registered agent are:	
	Marc J Herling		
		ımc	
	ina	inic	
	11112 Sweet Sage Avenue	•	
	Florida street address (P	O. Box NOT acceptable)	
	Boynton Beach		
		FL 33473	
	City	Zip	
Havina baan n	annal as naning I		
linhility com	uned as registered agent and navy at the place designates	d to accept service of process fo I in this certificate, I hereby acc	or the above stated limited
registered agen	t and agree to act in this can	nacity. I further agree to compl	rept the appointment as
statutes relatii	ng to the proper and comple	te performance of my duties, an	r wan the provisions of at ad Law familiar with and
accept the o	bligations of my position as	registered agent as provided fo	r in Chanter 605 F.S
	$41/$ $1/\mu$	r ⁿ	· in chapter ous, 1 .o.,
	- / ///, \ -f		· · · · · · · · · · · · · · · · · · ·
	1 / wich feet	49	
	Registered Agent's S	ignurure (REQUIRED)	 .
	CONT	INUED)	~~!
	(60:11)		energy and energy
			မေး မေး

"AMDD" - Ambania i Na	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
MGR	Marc J Herling
· · · · · · · · · · · · · · · · · · ·	11112 Sweet Sage Avenue
	Boynton Beach FL 33473
AMBR	Matthew Herling
	181 Front Street APT 1G
	Brooklyn, NY 11201
Use attachment if necessary)	
E V: Other provisions, if any.	
REQUIRED SIGNATURE:	Qua G
Signature of a member or a	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am awar nent to the Department of State constitutes a third degree
Signature of a member or a This document is executed in accordance any false information submitted in a document	With section 605.0203 (1) (b). Florida Statutes, Lam awar
Signature of a member or a This document is executed in accordance any false information submitted in a docum as provided for in s.817.155, F.S. Marc J Herling	with section 605.0203 (1) (b). Florida Statutes, I am awar nent to the Department of State constitutes a third degree
Signature of a member or a This document is executed in accordance any false information submitted in a docum as provided for in s.817.155, F.S. Marc J Herling Typ	with section 605.0203 (1) (b). Florida Statutes, I am awar nent to the Department of State constitutes a third degree

ARTICLE IV-