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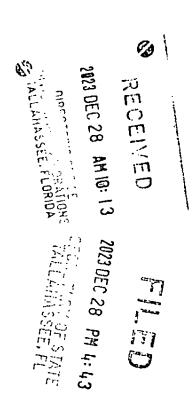
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PICK-UP	WAIT MAIL
	Business Entity Name)
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CORPORATE ACCESS, _____

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236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

WALK IN

PICK UP: BROOK 12/28 **CERTIFIED COPY** XX**PHOTOCOPY** GS XXFILING CONVERSION SOUTH FLORIDA ELITE FLAG FOOTBALL, INC. (CORPORATE NAME AND DOCUMENT #) SPECIAL **INSTRUCTIONS:**

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.

South Florida Elite Flag Football, Inc. (Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Not for Profit Corporation	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trus	
First organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country)	
(Enter state, or if a non-U.S. entity, the name of the country)	
06/21/2021 อก	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organizat	ion:
South Florida Elite Flag Football, LLC	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: 01/01/2024. (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days a 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 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 27 day of December	20 _23
Signature of Authorized Representative of Lim	
Signature of Authorized Range antative.	De Lana
Signature of Authorized Representative: ————————————————————————————————————	Title: President
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Printed Name: Amanda Lara	Title: President
	· · · · · · · · · · · · · · · · · · ·
Signature: Printed Name:	Title
Signature:	
Signature: Printed Name:	Title:
Signature: Printed Name:	Title:
Signature:Printed Name:	72.1
Timed Name.	! ille;
Signature:	
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	Officer. corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
South Florida Elite Flag Football, LLC	
(Must contain the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1430 SW 27th St Apt 6B	1430 SW 27th St Apt 6B
Fort Lauderdale, FL 33315	Fort Lauderdale, FL 33315
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the r	ered Agent. You must designate an individual or another
Joel Friend & Associates, Inc.	
Name	
2863 Executive Park Drive, Su	uite 105
Florida street address (P.O.	
Weston	EI 33331
City	Zip
registered agent and agree to act in this capacistatutes relating to the proper and complete paccept the obligations of my positionals registered Agent's Sign	accept service of process for the above stated limited this certificate. I hereby accept the appointment as ity. I further agree to comply with the provisions of all verformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S., atture (REQUIRED)
(CONTINI	ED)

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Amanda Lara
	1430 SW 27th St Apt 6B
	Fort Lauderdale, FL 33315
(Use attachment if necessary)	
LE V: Other provisions, if any,	

Signature of a member or an authorized representative of a member 288

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree reliance as provided for in s.817.155. F.S.

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) S 5.00 Certificate of Status (Optional)