L24000039712

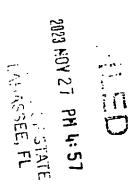
(R	equestor's Name)
(Ad	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(B	usiness Entity Name)
	accument Number)
(D	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:





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11/27/23--01045--001 **155.00



T. MATTHEWS

COVER LETTER

TO: New Filing S Division of C					
1411 1 5 111	NIUM HOLDINGS OF LA	KE G	EMILC.		
SUBJECT: MILLEN	(Name of Res			d Com	many)
		-			, <u>-</u>
			_		d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return all corr	espondence concerning	g this i	matter to:		
CHARLES J SMITH					
	(Contact Person)	·			
MILLENNIUM BUSINE	ESS SERVICES LLC				
·-	(Firm/Company)				
6551 N ORANGE BLO	DSSOM TRAIL SUITE 20	9-304			
	(Address)				
MOUNT DORA, FL 32	2757				
	City, State and Zip Code)				
CSMITH@MILLENNIL	JMBUSINESSES.COM				
E-mail Address: (to b	oe used for future annual re	port no	tifications)		
For further informati	on concerning this mat	tter, pl	ease call:		
CHARLES J SMITH		_at (_	352 、	230-6	6901 EXT 05
(Name of Conta	act Person)	ar (_	(Area Code)	(Day	time Telephone Number)
	for the following amount a bank located in the			ocess	sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status		80.00 Filing l Certified Copy		S185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add					t Address:
New Filing S					Filing Section
Division of C P.O. Box 632	-				ion of Corporations Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



Articles of Conversion

For

: 2023 HOV 27 PH 4: 57

"Other Business Entity"

Into

OF STATE

Florida Limited Liability Company

: ASSEE, FL

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.

MILLENNIUM HOLDING COMPANY LTD OF LAKE GEM 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
OCTOBER 14, 2023 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: MILLENNIUM HOLDINGS OF LAKE GEM 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>19TH</u>	day of DECEMBER	20 <u>23</u>
Signature	of Autho	rized Representative of Li	mited Liability Company:
~ :	6		Title: CFO, GENERAL COUNSEL
Signature of	of Authori	zed Representative:	OF CEO CENEDAL COUNCEL
Printed Nat	nc: CHAR	LES J SMITH	Title: CFO, GENERAL COUNSEL
Signature(s) on beh	alf of Other Business Entity	: [See below for required signature(s)]
Signature:	Ülg	H	
Printed Nar	ne: CHAR	LÉS'J SMITH	Title: AUTHORIZED PERSON
Signature:			711.1
Printed Nai	me:	<u>. </u>	Title:
Signature:			<u> </u>
Printed Nar	me:		Title:
Signature:			
Printed Nar	me:		Title:
C:			
Signature:			Title:
Printed Nai	me:		Title.
Signature:			
Printed Na	me:		Title:
	of Chairma	ion: in, Vice Chairman, Director, rs have not been selected, an	
		<mark>Partnership or Limited Lial</mark> eral Partner.	bility Partnership:
		Partnership or Limited Liab ceneral Partners.	oility Limited Partnership:
All others: Signature o		orized person.	
Fees:			
Λrı	ricles of C	onversion:	\$25.00
		ida Articles of Organization	
	rtified Co		\$30.00 (Optional)
	rtificate of	, -	\$5.00 (Optional)
			\ I

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		2023 NOV 27 PM 4: 58
MILLENNIUM HOLDINGS OF LAKE GEM LLC		LAHASBEE, FL
(Must contain the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
272 SILVERADO STREET	6551 N ORANGE BLOSSO	M TRAIL
TAVARES, FL 32778	SUITE 209-304 MOUNT DORA, FL 32757	
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 recommendation of the Property	tered Agent. You must designate an in	
Name	<u> </u>	
272 SILVERADO STREET		
Florida street address (P.O	Box NOT acceptable)	
TAVARES	FL ³²⁷⁷⁸	
City	Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capac	n this certificate, I hereby acc	ept the appointment as

Registered Agent's Signature (REQUIRED)

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.

(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	
MGR	MICHELLE E BROWN
	272 SILVERADO STREET
	TAVARES, FL 32778
MGR	WILLIAM P BROWN
	272 SILVERADO STREET
	TAVARES, FL 32778
	
(Use attachment if necessary)	
LE V: Other provisions, if any. ION: PERPETUAL	
SE: ANY LAWFUL PURPOSE	
	<u></u>

Signature of a member or an authorized representative of a member

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 felony as provided for in s.817.155, F.S.

CHARLES J SMITH, AUTHORIZED REPRESENTATIVE

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)