L2400000 9661

(Requ	uestor's Name)	
(Addı	ess)	
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(Addr	ess)	
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	ne)
(Docu	ıment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fil	ling Officer:	





300417788193

10/24/23--01005--019 **150.00

10-27-27



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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Victory IT, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
(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)
06/01/2009 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Victory IT, L.L.C.
(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 18 day of October	20_23	
Signature of Authorized Representative of Limit	ed Liability Company:	
Signature of Authorized Representative: Printed Name: Lenny Schwartz	Title: Owner	
Signature(s) on behalf of Other Business Entity: [5]		
Signature: Printed Name: Lenny School	Tido: Own Burno gad paren	
Signature: 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, Director, or Off Directors or Officers have not been selected, an Inc.		
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> . 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)	23 PH 2:58

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company i	s:
16 - 27 - 16	
Victory IT, L.L.C. (Must contain the words "Limited Liabi	Sty Compone "L.L.C." or "FLC")
(Mass contain the winds - Elimited Elimit	my Company. E.E.C., W. EEC.)
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Lenny Schwartz	Lenny Schwartz
6256 Baywood Court	6256 Baywood Court
Bradenton, FL 34211	Bradenion, FL 34211
(The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.)	
The name and the Florida street address of the	e registered agent are.
Lenny Schwartz	
Nai	ne
6256 Baywood Court	
Florida street address (P.	O. Box NOT acceptable)
Bradenton	FL 34211
City	Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as	I to accept service of process for the above stated limited in this certificate. I hereby accept the appointment as acity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and registered agent as provided for in Chapter 605, F.S
(CONT	INUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Loppy Schurete
	Lenny Schwartz 6256 Baywood Court
	Bradenton, FL 34211
	Didderron, FE 34211
···	
(Use attachment if necessary)	
(Use attachment if necessary)	
• ,	
(Use attachment if necessary) FICLE V: Other provisions, if any.	
• ,	
• ,	
• ,	
• ,	
FICLE V: Other provisions, if any.	
FICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	n authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or at This document is executed in accordance we any talse information submitted in a document	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that ent to the Department of State constitutes a third degree felony
REQUIRED SIGNATURE: Signature of a member or at This document is executed in accordance to	
REQUIRED SIGNATURE: Signature of a member or at This document is executed in accordance wany talse information submitted in a docume as provided for in s.817,155, F.S.	our section 605,0203 (1) (b), Florida Statutes, I am aware that ent to the Department of State constitutes a third degree felony
REQUIRED SIGNATURE: Signature of a member or at This document is executed in accordance wany talse information submitted in a docume as provided for in s.817,155, F.S.	our section 605.0203 (1) (b), Florida Statutes, I am aware that ent to the Department of State constitutes a third degree felony
REQUIRED SIGNATURE: Signature of a member or at This document is executed in accordance we any talse information submitted in a docume as provided for in s.817,155, F.S.	ent to the Department of State constitutes a third degree felony ed or printed name of signee Filing Rees
REQUIRED SIGNATURE: Signature of a member or at This document is executed in accordance we any talse information submitted in a docume as provided for in s.817,155, F.S.	ent to the Department of State constitutes a third degree felony cd or printed name of signce Filing Fees Organization and Designation of Projectored Associations Filing Fees

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

ARTICLE IV-

Company: