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(Red	questor's Name)	*
(Add	dress)	
(Add	iress)	
(City	//State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bus	iness Entity Nam	e)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
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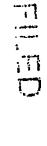




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2023 SEP 19 PM 2: 02



COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Thee Sharpest (Name of	Clean LLC Resulting Florida Limited Con-	npany)
The enclosed Articles of Conversion, Ar Business Entity" into a "Florida Limited	ticles of Organization. and	d fees are submitted to convert an "Other
Please rourn all correspondence concern	ning this matter to:	
Tiffany Sharp (Contact Person) Thee Sharpest (Firm/Company) 1135 N Willham R (Address)		
7 Nee Sharpest (Firm/Company)	Clean LLC	
1135 N Wickham R	oad Apt # 121	
Melbourne Florida 3	2935	
Melbourne Flurida 3 (City, State and Zip Code Tiffanyy Sharp @ gma. E-mail Address: (to be used for future annual	l report notifications)	
For further information concerning this r	natter, please call:	
(Name of Contact Person)	at (530)49 (Area Code)_(Dayt	ime Telephone Number)
Enclosed is a check for the following am dollars and drawn on a bank located in the		ed by this office must be payable in US
\$\frac{1}{2}\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\	s □\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address:		Address:
New Filing Section Division of Corporations		iling Section on of Corporations
P.O. Box 6327		entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

Tallahassee, FL 32314

FILED

2023 SEP 19 PM 2: 02

OF STATE LAHASSEE, FL

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: Thee Sharpst Clean LLC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited liability Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
on $\frac{1/69/2023}{\text{(date of organization, formation or incorporation)}}$
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Thee Shapest Clean UC.
(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 11 yof September 20 23 Signature of Authorized Representative of Limited Liability Company: Signature of Authorized Representative: Why Suf Printed Name: Tiffany Sharp Title: owner Manager Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature: Printed Name: Title: Signature: ______ Title: ______ Signature: Signature: ______ Title: _____ Signature: Printed Name: _____ Title: _____ Signature: Printed Name: ______ Title: _____ Signature: Printed Name: ______ Title: _____ If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of **ALL** General Partners. All others: Signature of an authorized person. Fees: Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00 Certified Copy: \$30.00 (Optional) Certificate of Status: \$5.00 (Optional)

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABRISTEY/GOMPANY2

ARTICLE 1 - Name: The name of the Limited Liability Company is:	Y OF STATE LAHASSEE, FL
Thee Sharpest (Must contain the words Limited Liability	Clean LLC. Company, "L.E.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1135 N Wickham Road Apt 1 MPIDOUME FL 32935	±121
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ared Agent. You must designate an individual or another
The name and the Florida street address of the re-	egistered agent are:
Tiffany	Sharp
Florida street address (P.O.	Road Ap+ # 121 Box NOT acceptable)
Melboune	FL 32935 Zip
liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete paccept the obligations of my position as reg	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of al erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 605, F.S

(CONTINUED)

Company:	-
Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR +AMBR	Tiffany Shorp 1135 N WICKHAM ROOD # Apt Mel Dourne, Fl 32936
(Use attachment if necessary) CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
Signature of a member or a	I In authorized representative of a member
any false information submitted in a documas provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes. I am aware the to the Department of State constitutes a third degree felo state or printed name of signee
	<u>Filing Fees</u>
\$125.00 Filing Fee for Articles of \$30.00 Certified Copy (Optiona	Organization and Designation of Registered A

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

ARTICLE IV-