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(Requestor's Name)
(Address)
(Address)
(100.000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of	Conversion is:
CAND C BUILDING COMPANY OF MICHIGAN (Enter Name of Other Business Entity) FG7WWWIE	,32
2. The "Other Business Entity" is a S CORPORATION (Enter entity type. Example: corporation, limited partnership, general partnership, common law	or business trust, etc.)
First organized, formed or incorporated under the laws ofMCHIGAN	
on 03 09 1978 (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of	of Organization:
C AND C BUILDING COMPANY OF MICHIGAN 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 cale 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 adocument's effective date on the Department of State's records.	
5. The plan of conversion has been approved in accordance with all applicable statutes.	
 The "Converted or Other Business Entity" has agreed to pay any members having appraisal rig which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. 	thts the amount to
- ! !	[] 2023 SEP .

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
CAND C BUILDING COMPAW (Must contain the words "Limited Liability	Y OF MICHIGAN L.1 Company, "L.L.C.," or "LLC.")	C
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Li	ability Company is:
Principal Office Address:	Mailing Address:	
8380 EXCALIBUR CIR UNIT H8 MAPLES: FL 34108	9380 EXCALIB UNIT H8 NAPLES FL 34	WRCIR 108-6749
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 red Agent. You must designate an indivi	s Signature: idual or another
The name and the Florida street address of the re	gistered agent are:	
STEPHANIE CHAR Name	NAS	
Florida street address (P.O.	Box NOT acceptable)	
NAPLES	FL 34108 Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacistatutes relating to the proper and complete paccept the obligations of my position as reg	this certificate, I hereby accept ty. I further agree to comply w erformance of my duties, and I	the appointment as ith the provisions of all am familiar with and
Stiphania Cha Registered Agent's Sign	ature (REQUIRED)	
(CONTINI	U ED)	2023 SEP -8

Signed this 30 rs day of AUGUST	20_23
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Attacher Printed Name: STEPHANIE CHARNAS	Title: PRESIDENT
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)
Signature: Costa J. Characo Printed Name: COSTA J. CHARNAS	
Signature: <u>Stephanie Churan</u> Printed Name: <u>STEPHANIE CHARNAS</u>	Title: SECRETARY
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 of the 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 Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	·
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

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

<u>Fitle:</u> AMBR" = Authorized Member	Name and Address:
MGR" = Manager	
MGR	COSTA J CHARNAS
	24644 SARGENT AVE
	SOUTHFIELD MICH 48033
AMBR	STEPHANIE CHARNAS
	9380 EXCALIBUR CIR VALTH
	NAPLES FL 34108
	
Use attachment if necessary)	23
	2023 SEP
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LE V: Other provisions, if any.	
	, , ထိ
<u>REQUIRED</u> SIGNATURE:	
	$\alpha \ell$
suprame	James
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
	ment to the Department of State constitutes a third degree felon
as provided for in s.817.155, F.S.	
as provided for in s.817.155, F.S.	CHARNAS
as provided for in s.817.155, F.S.	CHARNAS ped or printed name of signee