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(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: LIGHT AND JOY, LLC		
(Name of R	esulting Florida Limited	(Company)
The enclosed Articles of Conversion, Arti- Business Entity" into a "Florida Limited		n, and fees are submitted to convert an "Other in accordance with s. 605,1045, F.S.
Please return all correspondence concerni	ng this matter to:	
RAMON ORTEGA		
(Contact Person)		
RAMON ORTEGA CPA, PA		
(Firm/Company)		
1555 BONAVENTURE BLVD. SUITE 1028		
(Address)		
WESTON, FL 33326		
(City, State and Zip Code)	
RORTEGA@RAMONORTEGACPA.COM		
E-mail Address: (to be used for future annual	report notifications)	
For further information concerning this m	iatter, please call:	
RAMON ORTEGA	at (954)	465-9315
(Nume of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amodollars and drawn on a bank located in the		ocessed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\square{1}\$155.00 Filing Fees and Certificate of Status	Cl\$ 180.00 Filing Fe and Certified Copy	Certified Copy, and Certificate of Status
Mailing Address: New Filing Section	\overline{N}	Ireet Address: lew Filing Section
Division of Corporations		hivision of Corporations
P.O. Box 6327 Tallahassee, FL 32314		he Centre of Tallahassee 415 N. Monroe Street, Suite 810
rananassee, PL 52514		allahassee, FL 32303

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.

(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
2. The "Other Business Enuty" is a
First organized, formed or incorporated under the laws of DELAWARE (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)
01/05/2023 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: LIGHT AND JOY, 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.)
·

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 th	us <u>03</u>	day of JANUARY		_ 20
•				ed Liability Company:
Signature Printed N	e of Authorize ame: <u>JUAN M</u>	ed Representative: EJIA ARBELAEZ	Juan	David Myra a Title: MANAGER
				See below for required signature(s)]
Signature	: Juan	David Myris	α	
Printed N	ante: (JAN MI	EJIA ARBELAEZ()		Title: MANAGER
Printed N	ame:	 		Title:
Signature	:			
Printed N	ame:			Title:
Signature	:			
Printed N	ame:			Title:
Signature	:			
Printed N	ame:			Title:
Sionature				
Printed N	ame:	· · · · · · · · · · · · · · · · · · ·		Title:
Signature		Vice Chairman, Di		Officer. orporator must sign.
	a Generat Par of one Gener	rtnership or Limit al Partner.	ed Llability	y Partnership:
	a Limited Par s of <u>ALL</u> Gen		ed Llability	<u>: Limited Partnership:</u>
All other Signature	<u>s:</u> of an authoriz	zed person.		
Fees:				
F	rticles of Con ees for Florid ertified Copy ertificate of S	a Articles of Organ	iization:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

LIGHT AND JO		ability Company, "L.L.C.," or "LLC.")	
ARTICLE II		a marina da la marina marina da marina d	T
i ne mauing ad	dress and street address of th	e principal office of the Limited Liabi	inty Company is:
Principal Offi	ce Address:	Mailing Address:	
876 NW 110TH	AVE	876 NW 110TH AVE	
PLANTATION,	FL 33324	PLANTATION, FL 33324	
The name and	the Florida street address of t	-	
The name and	JUAN MEJIA ARBELAEZ	-	
The name and	JUAN MEJIA ARBELAEZ N		
The name and	JUAN MEJIA ARBELAEZ N 876 NW 110TH AVE		
The name and	JUAN MEJIA ARBELAEZ N 876 NW 110TH AVE	P.O. Box <u>NOT</u> acceptable)	
The name and	JUAN MEJIA ARBELAEZ N 876 NW 110TH AVE Florida street address (ame	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	JUAN MEJIA ARBELAEZ
MGK	
	876 NW 110TH AVE
	PLANTATION, FL 33324
MGR	LUZ ZÉA RÉSTREPO
	876 NW 110TH AVE
	PLANTATION, FL 33324
	1 DATIMINATE SOUR
(Use attachment if necessary)	
•	
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TIPLY of The St	
CLE V: Other provisions, if any.	
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REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	viiá a
	rija a
REQUIRED SIGNATURE:	U
REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member
Signature of a member or This document is executed in accordance	U an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware th
Signature of a member or This document is executed in accordance	U an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware th
Signature of a member or This document is executed in accordance my false information submitted in a document provided for in s.817.155, F.S.	U an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware th
Signature of a member or This document is executed in accordance my false information submitted in a document provided for in s.817.155, F.S. JUAN MEJIA ARBELAEZ	Using an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware the ment to the Department of State constitutes a third degree felo
Signature of a member or This document is executed in accordance my false information submitted in a document provided for in s.817.155, F.S. JUAN MEJIA ARBELAEZ	U

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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

ARTICLE IV-

1997