# L2U000078637

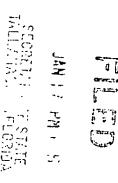
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





700421745197

01/17/24--61025--0.70 ++.81.01



## **COVER LETTER**

TO: New Filing So Division of C								
SUBJECT: LOTUS L	ANE LITERARY L.L.C							
	(Name of Res	ulting l	Florida Limit	ed Com	pany)	-		
					I fees are submitted to cordance with s. 605.10			ier
Please return all corre	espondence concerning	g this	matter to:					
PRIYA DORASWAMY								
	(Contact Person)			•				
LOTUS LANE LITERA	RY							
	(Firm/Company)		-	•				
301, 1ST STREET SO	UTH, UNIT 901							
	(Address)			•				
ST PETES, FLORIDA	33701							
	City, State and Zip Code)		<del></del>	•				
priya.doraswamy@gm	ail.com							
E-mail Address: (to b	e used for future annual rep	port no	tifications)	•				
For further informati	on concerning this mat	ter, p	lease call:					
PRIYA DORASWAMY		at (	973	,80389	990			
(Name of Conta	ict Person)	at (_		(Day	time Telephone Number)	-		
	or the following amou a bank located in the l			rocess	ed by this office must b	e payabl	le in U	S
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status		180,00 Filing Certified Cop		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status	TALI SE	_	
Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, i	ection orporations 7			New I Divisi The C 2415 I	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite assec, FL 32303	CREW FORKE	JAN 17 PM C S	5 5 6

#### **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.

	The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  US LANE LITERARY L.L.C
	(Enter Name of Other Business Entity)
2. Т	The "Other Business Entity" is a L.L.C (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 A	APRIL 8, 2013
(	date of organization, formation or incorporation)
3. T	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
LOT	US LANE LITERARY L.L.C
	(Enter Name of Florida Limited Liability Company)
4. I	JANUARY 10, 2024  f not effective on the date of filing, enter the effective date:  - effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
the Note	e effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after date this document is filed by the Florida Department of State.)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
5. T	he plan of conversion has been approved in accordance with all applicable statutes.
6. T w	he "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 10 day of JANUARY, 2024	2024.		
Signature of Authorized Representative of Limit			
Signature of Authorized Representative: Printed Name: PRIYA DORASWAMY	Title: FOUNDER/SINGLE MEMBER	_	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]		
Signature: Priya DSWamy Printed Name: PRIYA DORASWAMY	Title: FOUNDER	<del>-</del>	
Signature:Printed Name:	Title:	_	
Signature:Printed Name:			
Signature:Printed Name:	Title:	_	
Signature:Printed Name:	Title:	- -	
Signature:Printed Name:	_ Title:	_ _	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	Officer. corporator must sign.		
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:		
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	Flore .	
All others: Signature of an authorized person.		JAN I	T
Fees:			15 15 15 15 15 15 15 15 15 15 15 15 15 1
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	TOTAL TO	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na The name of the L	<b>me:</b> Limited Liability Compa	ıny is:	
LOTUS LANE LITE			<del></del>
(M	fust contain the words "Limited	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - A	ddress:		
The mailing addre	ess and street address of	the principal office of the Limite	d Liability Company is:
Principal Office	Address:	Mailing Address:	
301, Ist STREET S	OUTH, UNIT 901	301, 1st STREET SOUTH,	UNIT 901
ST PETES, FLORI		ST PETES, FLORIDA 3370	)1
(The Limited Liability C business entity with an	Company cannot serve as its ow active Florida registration.)	stered Office, & Registered Ago in Registered Agent. You must designate an in of the registered agent are:	ent's Signature: individual or another
The name and the	Tiorida street address o	in the registered agent are.	
	PRIYA DORASWAMY	<u>.</u>	
		Name	
	301, 1ST ST SOUTH, U	JNIT 901	
		s (P.O. Box <u>NOT</u> acceptable)	
	ST PETES	FL <sup>33701</sup>	
	City	Zip	
liability com registered agen statutes relatii	pany at the place design t and agree to act in this ing to the proper and com- bligations of my position Prigable Registered Agent	and to accept service of process for ated in this certificate, I hereby acceptacity. I further agree to composite performance of my duties, and as registered agent as provided for service (REQUIRED)	cept the appointment as ly with the provisions of all nd I am familiar with and

## ARTICLE IV-

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

'AMBR" = Authorized Member	
'MGR" = Manager AMBR	PRIYA DORASWAMY
MDUN	301, 1ST STREET SOUTH, UNIT 901
	ST PETES, FL 33701
Use attachment if necessary)	
LE V: Other provisions, if any.	
EV: Other provisions, if any.  REQUIRED SIGNATURE:	
LE V: Other provisions, if any.  REQUIRED SIGNATURE:	
EV: Other provisions, if any.  REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:  Pryadswar	-
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document in a docum	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ument to the Department of State constitutes a third degree felony
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ument to the Department of State constitutes a third degree felony
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155, F.S.	ran authorized representative of a member re with section 605.0203 (1) (b), Florida Statutes. I am aware that ument to the Department of State constitutes a third degree felony  RIYA DORAS
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155, F.S.	r an authorized representative of a member re with section 605.0203 (1) (b), Florida Statutes. I am aware that tument to the Department of State constitutes a third degree felony upon the Department of State constitutes
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Pri	r an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ument to the Department of State constitutes a third degree felony  PRIYA DOZAS  yped or printed name of signee  Filing Fees
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Pri	ran authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ument to the Department of State constitutes a third degree felony  yped or printed name of signee  Filing Fees of Organization and Designation of Registered Agent