# L24000082625

(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(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.

The Foresight Companies, LLC (Enter Name of Other Business Entity)		
Limited Liability Company		
2. The "Other Business Entity" is a	on law or bu	usiness trust, etc.)
First organized, formed or incorporated under the laws of		
(Enter state, or if a non-U.S. entity, the	e name of th	ne country)
12/15/2003 on		
(date of organization, formation or incorporation)		
3. The name of the Florida Limited Liability Company as set forth in the attached Art	ticles of O	erganization:
The Foresight Companies, LLC		
(Enter Name of Florida Limited Liability Company)	_·	
01/01/2024 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 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 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 appra	-	the amount to
which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	<u> </u>	2024 r.t
	•	- <del></del>
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	<del></del>	9: 
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Signed this 9th day of Mou	74.1 20.24
signed in s	<u> </u>
Signature of Authorized Representat	ive of Limited Liability Company:
	Man havin
Signature of Authorized Representative	··· VVV VV
Printed Name: Christopher H Cruger	Tille: Intemper
Signature(s) on behalf of Other Busine	ess Entity:  See below for required signature(s)
Signature: Muy Mil. h	
Printed Name: Christopher # Cruger	Title: Member
Signature: Bright Sobe	
Printed Name: Douglas Gober	Title: Member
Signature:	
Printed Name:	Title:
Signature:	
	Title:
Signature:	Title:
Frinted Name:	
Signature:	<u> </u>
Printed Name:	Title:
16 Charles Communications	
If Florida Corporation: Signature of Chairman, Vice Chairman, I	Director, or Officer
If Directors or Officers have not been sel	
	·
If Florida General Partnership or Lim	ited Liability Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Lim	ited Liability Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
Fees:	

\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Articles of Conversion:

Certified Copy: Certificate of Status:

Fees for Florida Articles of Organization:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limit	ed Liability Compa	ny is:	
The Foresight Companie		Liability Company, "L.L.C.," or "LLC,")	
ARTICLE II - Addre The mailing address ar		the principal office of the Limite	ed Liability Company is:
Principal Office Addi	ress:	Mailing Address:	
10323 SE Marigold Cir. Hope Sound, Florida 33	455	10323 SE Marigold Cir. Hope Sound, Florida 3345	5
	ny cannot serve as its own	stered Office, & Registered Ago Registered Agent. You must designate an	
The name and the Flor	ida street address of	the registered agent are:	
Ch	ristopher H Cruger	<del></del>	
		Name	
<del></del>	323 SE Marigold Cir.	(D.O. Pou NOT apparable)	
		(P.O. Box NOT acceptable)	
ПО	pe Sound City	FL 33455 Zip	
liability company registered agent and statutes relating to	at the place designa agree to act in this c the proper and comp tions of my position Registered Agent's	and to accept service of process forted in this certificate. I hereby acceptainty. I further agree to composite performance of my duties, as registered agent as provided for Signature (REQUIRED)	cept the appointment as ly with the provisions of al nd I am familiar with and

### ARTICLE IV-

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

WGR" = Manager  MGR  Christopher H Cruger  10323 SE Marigold Cir.  Hope Sound, Florida 33455  Use attachment if necessary)  E V: Other provisions, if any.  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 awar any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155, F.S.  Christopher H Cruger, Member  Typed or printed name of signee  Filing Fees  \$125.00 Filing Fee for Articles of Organization and Designation of Registered \$30.00 Certified Copy (Optional)  \$5.00 Certificate of Status (Optional)	<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
Use attachment if necessary)  LE V: Other provisions, if any.  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 awar any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817,155, E.S.  Christopher H Cruger, Member  Typed or printed name of signee Filing Fees  \$125,00 Filing Fee for Articles of Organization and Designation of Registered \$30,00 Certificate of Status (Optional)  \$5,00 Certificate of Status (Optional)			
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