124/1000/98980

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

Office Use Only



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01/31/24--01003--015 **150.00



COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: The Silent Partner Marketing, LL	LC	
(Name of Re	sulting Florida Li	mited Company)
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited L	_	ation, and fees are submitted to convert an "Other ny" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	ng this matter to):
Kyle Reyes		
(Contact Person)		
The Silent Partner Marketing, LLC		
(Firm/Company)		
111 Orange Ave Suite 302		
(Address)		
Fort Pierce FL 34949		
(City, State and Zip Code)		
kyle@thesilentpartnermarketing.com		
E-mail Address: (to be used for future annual re	eport notifications	
For further information concerning this ma	atter, please cal	l :
Kyle Reyes	at (4545364
(Name of Contact Person)	(Area Co	de) (Daytime Telephone Number)
Enclosed is a check for the following amount and drawn on a bank located in the		s processed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$180,00 Fill and Certified C	. ~
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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: The Silent Partner Marketing, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
December 2, 2013 on
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: The Silent Partner Marketing, 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.)
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 19 day of January	20_24		
Signature of Authorized Representative of Limit	ted Liability Company:		
Signature of Authorized Representative:	Title: President		
Signature(s) on behalf of Other Business Entity: {			
Signature: Printed Name: Kyle Reyes	Title: President		
Signature:Printed Name:			
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 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 Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:		
All others: Signature of an authorized person.			
Fees:		2024 J.N.	ا ۋ ئىشم
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	N31 PM 4: 2	
		. E	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Limited Liability Compan		
The Silent Partner			
()	Must contain the words "Limited L	ability Company, "L.L.C.," or "L.L.C.")	
ARTICLE II - A The mailing addr		ne principal office of the Limited Liability	y Company is:
Principal Office	Address:	Mailing Address:	
79 Indian Grass D)rive	111 Orange Ave Sute 302	
St. John FL 32259	9	Fort Pierce FL 34950	
	.		
business entity with a	un active Florida registration.)	Registered Agent. You must designate an individual or	
	un active Florida registration.) e Florida street address of Kyle Reyes		
	un active Florida registration.) e Florida street address of Kyle Reyes	the registered agent are:	
	un active Florida registration.) e Florida street address of Kyle Reyes 79 Indian Grass Drive	the registered agent are:	
	un active Florida registration.) e Florida street address of Kyle Reyes 79 Indian Grass Drive	the registered agent are: Name (P.O. Box NOT acceptable)	
	e Florida street address of Kyle Reyes 79 Indian Grass Drive Florida street address	the registered agent are: Name (P.O. Box <u>NOT</u> acceptable)	

(CONTINUED)

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
'MGR" = Manager	
MGR	Kyle Reyes
	79 Indian Grass Drive St. John FL 32259
	St. John FL 32259
	-
	•
	
Use attachment if necessary)	
LE V: Other provisions, if any.	
	1
REQUIRED SIGNATURE:	:
e e e e	;
	••
	- , .
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am awai
This document is executed in accordance any false information submitted in a documas provided for in s.817.155, F.S. Kyle Reyes	with section 605.0203 (1) (b), Florida Statutes. I am awal nent to the Department of State constitutes a third degree
This document is executed in accordance any false information submitted in a documas provided for in s.817.155, F.S. Kyle Reyes	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am awarment to the Department of State constitutes a third degree ped or printed name of signee Filing Fees

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