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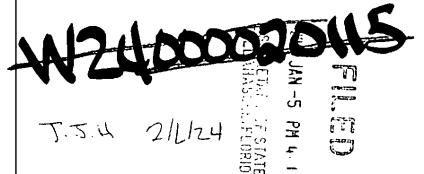
(Requestor's Name)
(Hoquesto, o Hame)
(Address)
(1001000)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





400421354304

01/05/24--01034--006 **150.00



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COVER LETTER

TO: New Filing				
Division of	Corporations			
SUBJECT: Illumal	ytics, LLC.			
	(Name of Re	sulting Florida Limit	ed Con	npany)
		_		d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all con	respondence concernin	g this matter to:		
Elliott Light				
	(Contact Person)			
Illumalytics, LLC				
	(Firm/Company)			
7840 Lilac Ln, Apt 12	21			
	(Address)			
Pensacola, FL 32514	1			
	(City, State and Zip Code)	-		
elliott@illumalyticsllc	.com			
E-mail Address: (to	be used for future annual re	port notifications)		
For further informa	tion concerning this ma	tter, please call:		
Elliott Light		_at (<u>507</u>	402-5	5395
(Name of Con	tact Person)	(Area Code)	(Day	time Telephone Number)
	for the following amount a bank located in the	-	rocess	ed by this office must be payable in US
■ \$150,00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Ad New Filing Division of	Section Corporations		New F Divisi	Address: Filing Section on of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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: Illumalytics, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Minnesota
(Enter state, or if a non-U.S. entity, the name of the country)
on 05/05/2023
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Illumalytics, 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.)
<u>Note:</u> 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 $\frac{7}{2}$	day of February	20 _2
Signature of	Authorized Representative of Li	mited Liability Company:
Signature of a	Authorized Representative: 800	not Links
Printed Name	Authorized Representative: <i>Ella</i> Elliott Light	Title: Owner
Signature(s)	on behalf of Other Business Entity	: [See below for required signature(s)]
a: C		
Signature: _C	Elliott Light	Title: Owner
Frinten Name	Linox Light	Title:
Signature:		
Printed Name	:	Title:
Signature:		Title:
Printed Name:	<u>:</u>	Title:
Signatura:		
Printed Name:	•	Title:
rimed rame.	· · · · · · · · · · · · · · · · · · ·	True.
Signature:		
Printed Name:	·	Title:
Signature:		Tide
rimied Name:	·	Title:
<u>If Florida Co</u>	rporation:	
Signature of C	Chairman, Vice Chairman, Director.	or Officer.
If Directors or	Officers have not been selected, an	Incorporator must sign.
	neral Partnership or Limited Liab	ility Partnership:
Signature of o	ne General Partner.	
If Florida Lin	nited Partnership or Limited Liab	ility Limited Partnership:
	ALL General Partners.	-
All others:		
Signature of a	n authorized person.	
Fees:		
Article	es of Conversion:	\$25.00
	or Florida Articles of Organization	
	ed Copy:	\$30.00 (Optional)
	cate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compan	y is:
Illumalytics, LLC	
(Must contain the words "Limited L	iability Company, "L.L.C.," or "LLC,")
ARTICLE II - Address: The mailing address and street address of the	he principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
7840 Lilac Ln	7840 Lilac Ln
Apt 121	Apt 121
Pensacola, FL, 32514	Pensacola, FL 32514
	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
	Name
7840 Lilac Ln, Apt 121 Florida street address	(P.O. Box NOT acceptable)
Pensacola	FL ³²⁵¹⁴
City	Zip
	and to accept service of process for the above stated limit

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Ellest Light
Registered Agent's Signature (REQUIRED)

(CONTINUED)

A	DTI	CI	F	IV_{-}

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

"AMBR" = Authorized Member	
"MGR" = Manager MGR	Elliott Light
MGK	7840 Lilac Ln, Apt 121
	Pensacola, FL 32514
	7 E113GC018, 1 E 323 14
(Use attachment if necessary)	
(
(SSS ministration is the second)	
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CLE V: Other provisions, if any.	
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CLE V: Other provisions, if any.	
CLE V: Other provisions, if any, REQUIRED SIGNATURE:	
CLE V: Other provisions, if any, REQUIRED SIGNATURE:	
CLE V: Other provisions, if any.	&
CLE V: Other provisions, if any. REQUIRED SIGNATURE: Elliott Ligs	
REQUIRED SIGNATURE: Elliott Ligar Signature of a member or	an authorized representative of a member
REQUIRED SIGNATURE: Elliott Ligar Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes, I am aware th
REQUIRED SIGNATURE: Elliott Ligar Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes, I am aware th
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 the
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. Elliott Light	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

Office of the Minnesota Secretary of State Certificate of Organization

I. Steve Simon. Secretary of State of Minnesota, do certify that: The following business entity has duly complied with the relevant provisions of Minnesota Statutes listed below, and is formed or authorized to do business in Minnesota on and after this date with all the powers, rights and privileges, and subject to the limitations, duties and restrictions, set forth in that chapter.

The business entity is now legally registered under the laws of Minnesota.

Name:

Illumalytics LLC

File Number:

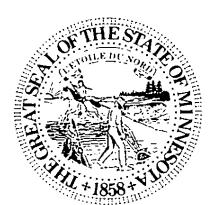
1390114400027

Minnesota Statutes, Chapter:

322C

This certificate has been issued on:

05/05/2023



Steve Simon

Secretary of State State of Minnesota

tere Pimm

Office of the Minnesota Secretary of State

Minnesota Limited Liability Company/Articles of Organization

Minnesota Statutes, Chapter 322C

The individual(s) listed below who is (are each) 18 years of age or older, hereby adopt(s) the following Articles of Organization:



ARTICLE 1 - LIMITED LIABILITY COMPANY NAME:

Illumalytics LLC

ARTICLE 2 - REGISTERED OFFICE AND AGENT(S), IF ANY AT THAT OFFICE:

Name Address:

1613 Canary Drive Albert Lea MN 56007 USA

ARTICLE 3 - DURATION: PERPETUAL

ARTICLE 4 - ORGANIZERS:

Name: Address:

Beau Hartman 137 S. Broadway Avenue Suite 2 Albert Lea MN

56007 United States

If you submit an attachment, it will be incorporated into this document. If the attachment conflicts with the information specifically set forth in this document, this document supersedes the data referenced in the attachment.

By typing my name, I, the undersigned, certify that I am signing this document as the person whose signature is required, or as agent of the person(s) whose signature would be required who has authorized me to sign this document on his/her behalf, or in both capacities. I further certify that I have completed all required fields, and that the information in this document is true and correct and in compliance with the applicable chapter of Minnesota Statutes. I understand that by signing this document I am subject to the penalties of perjury as set forth in Section 609.48 as if I had signed this document under oath.

SIGNED BY: Beau A. Hartman

MAILING ADDRESS: None Provided

EMAIL FOR OFFICIAL NOTICES: beau@beauhartmanlaw.com



Work Item 1390114400027 Original File Number 1390114400027

STATE OF MINNESOTA
OFFICE OF THE SECRETARY OF STATE
FILED
05/05/2023 11:59 PM

03/03/2023 11.39 FWI

Oteve Vimm

Steve Simon Secretary of State