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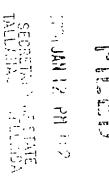
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Special Instructions to	Filing Officer:	

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#### **COVER LETTER**

TO: New Filing ! Division of !	Section Corporations		
SUBJECT:	The Viol	land Agency 1	LC
	(Name of Re	sulting Florida Limited Co	mpany)
The enclosed Article Business Entity" int	es of Conversion, Artic o a "Florida Limited L	eles of Organization, a iability Company'' in a	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all cor	respondence concernin	g this matter to:	
Amando	(Contact Person)		
	(Firm/Company)		
400 Noc	th Tampa St (Address)	- 15th Floor	
Tamp	A FL 3366 (City, State and Zip Code)	2	
E-mail Address: (to	be used for future annual re	port notifications)	
	ion concerning this ma		
Amanba	Violand act Person)	at (330 ) 10	5-9368
(Name of Cont	act Person)	(Area Code) (Da	ytime Telephone Number)
Enclosed is a check dollars and drawn or	for the following amount a bank located in the	int: (All checks proces United States)	sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□S155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
Mailing Add			t Address:
New Filing S Division of C			Filing Section
P.O. Box 631			tion of Corporations Centre of Tallahassee
Tallahassee,			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 Violand Azency 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)
on ///23 (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 Violand Agency U.C. (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: \(\sum / \sum \alpha \).  (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.

#### **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 Violand Agency LLC (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (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)
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
The Violand Agency UC  (Enter Name of Florida Limited Liability Company)
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 1/1/24.
(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 10 day of January	_ 20 <u> 24</u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:	1 1/ex
Printed Name: Amanda Violand	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)!
Signature: Amanda Violand	see selow for required signature(s))
Signature: (	7
Printed Name:	Title: Owner
Manda Violand	
Signature:Printed Name:	
Titlited (value)	
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
7 Hitod (value)	
Signature:	
Printed Name:	Title:
If Florida Corporation:	- 40
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
<u>If Florida General Partnership or Limited Liabili</u>	ty Partnershin:
Signature of one General Partner.	ty a determine.
•	
<u>If Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of ALL General Partners.	
All others	
All others: Signature of an authorized person.	
orginature of an aumorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nam				
The name of the Lir	nited Liability Company	is:		
-	The Violand toontain the words "Limited Liab	Agenc	y LLC	
(Mus	t contain the words "Limited Liab	oility Company, "I	L.L.C.," or "LLC.")	
ADTICLE AT A L				
ARTICLE II - Add The mailing address	iress:  s and street address of the	principal offi	ice of the Limite	ed Liability Company is:
Principal Office Ac	ddress:	Mailing	Address:	
400 North T	impa St 1 33402		ne	<del></del>
Tampa, F	L 33402			
• ,				
(The Limited Liability Cor	gistered Agent, Register mpany cannot serve as its own Restive Florida registration.)	red Office, & egistered Agent, Yo	Registered Ag ou must designate an	ent's Signature: individual or another
The name and the F	lorida street address of th	e registered a	gent are:	
	Λ \	لممادما		
-	Ananda	me		
	6923 Lone Florida street address (F	Oak C	2/19	
	Florida street address (P	P.O. Box <u>NOT</u>	acceptable)	
	Naples City	FL	90142	
	Čity		Zip	
liability compa registered agent a statutes relating	my at the place designated nd agree to act in this cap	l in this certifi pacity. I furthe te performanc	cate, I hereby ac er agree to comp e of my duties, a	ly with the provisions of all nd I am familiar with and

(CONTINUED)

#### ARTICLE IV-

as provided for in s.817.155, F.S.

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

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	Amanda Violand 6923 Lone Oak Blud Naples, FL 34109
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
	r
This document is executed in accordance v	in authorized representative of a member with section 605,0203 (1) (b), Florida Statutes. I am aware that to the Department of State constitutes a third degree felor

Amanda Violand
Typed or printed name of signec

Filing Fees