# LZYUUU IZGUSS

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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## FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DR TALLAHASSEE, FL 32309 (850) 524-5437 / (850) 524-6243 / (850) 491-9625

Please use funds	from this acco	unt: J20210000160: \$150.00	
<b>Authorization Sig</b>	gnature: 🗸 🏒 🦯	fr.	
BUSINESS NAME		Document#	
Edward A Proenza  Certified Copy Certificate of Status	a, LLC		
NEW FILINGS		<u>AMENDMENTS</u>	
Profit Corp Not for Profit Limited Liability Domestication LLLP CORP Other		AmendmentResignation of R.A. Officer/DirectorChange of Registered AgentRevocation of DissolutionMergerXArticles of ConversionAmended & Restated Articles of IncStatement of Authority	
APOSTILLE(s) &	OTHER FILINGS		
Apostille Country Annual Report	Foreign FilingReinstatementQualificationFictitious Name		
EXAMINER'S INI	TIALS:		

### •FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DR TALLAHASSEE, FL 32309 (850) 524-5437 / (850) 524-6243 / (850) 491-9625

Authorization Signature:	- Francisco de la constantina della constantina
<u> </u>	Document#
Edward A Proenza, LLC	
Certified Copy	
Certificate of Status	
NEW FILINGS	<u>AMENDMENTS</u>
Profit Corp	Amendment
Not for Profit	Resignation of R.A. Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Revocation of Dissolution
LLLP	Merger
CORP	_XArticles of Conversion
Other	Amended & Restated Articles of IncorporationStatement of Authority
APOSTILLE(s) & OTHER FILINGS	
Apostille Foreign Filing	
CountryReinstatement	
Annual ReportQualification	
Fictitious Name	
EXAMINER'S INITIALS:	



#### **COVER LETTER**

Division of C	orporations				
SUBJECT: Edward A	A Proenza, LLC				
	(Name of Res	ulting Florida Li	mited Cor	mpany)	<del></del>
	s of Conversion, Artic a "Florida Limited Li	_	-		
Please return all corre	espondence concerning	g this matter t	o:		
Edward Proenza					
	(Contact Person)				
Jeck, Harris, Raynor &	Jones, P.A.				
	(Firm/Company)		<del></del>		
790 Juno Ocean Walk,	Suite 600				
	(Address)				
Juno Beach, FL 33408					
((	City, State and Zip Code)	<u> </u>			
eproenza@gmail.com					
E-mail Address: (to b	e used for future annual re	port notifications	5)		
For further information	on concerning this ma	tter, please ca	11:		
Edward A Proenza		_at ( <u>561</u>	762-	1209	
(Name of Conta	ct Person)	(Area Co	de) (Da	ytime Telephone Number	·)
	or the following amou a bank located in the	,	•	sed by this office mu	st 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 Fit and Certified (	-	□\$185,00 Filing Fees Certified Copy, and Certificate of Status	i. = ^7 · · :
Mailing Add New Filing So Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New Divis The 0 2415	Filing Section sion of Corporations Centre of Tallahassee N. Monroe Street, Schassee, FL 32303	

**TO:** New Filing Section

**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: EDWARD ALEXANDER PROENZA, P.A.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
Florida
(Enter state, or if a non-U.S. entity, the name of the country)
12/18/2020 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:
Edward A Proenza, 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 12	day of March	2024			
Signature of Auth	orized Representative of Limi	ted Liability Company:			
Signature of Autho	rized Representative:				
Printed Name: Edwa	rd A Proenza	Title: President			
Signature(s) on bel	nalf of Other Business Entity:	See below for required signature(s)			
Signature: Edw	ard frounza	Title: Manager			
Printed Name: Edwa	R <del>G9A*Pf</del> ōenza	Title: Manager			
Signature:		Title:			
rinited Name	-		•		
Signature:		Title:	-		
Printed Name:		Title:			
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Printed Name:		Title:			
Signature:		Title:			
Printed Name:	<del></del>	itte:			
Signature:					
Printed Name:		Title:	-		
1651 11 6	.*				
If Florida Corpora	ition: ian, Vice Chairman, Director, or	Officer			
_	ers have not been selected, an In-				
If Florida General Signature of one Ge	Partnership or Limited Liabili neral Partner.	ty Partnership:			
If Florida Limited	Partnership or Limited Liabili	ty Limited Partnership:			
Signatures of ALL					
All others:			-		(
Signature of an auth	orized person.		<u>:</u>	J	
Γ			:		
Fees:			t I		, -
Articles of (	Conversion:	\$25.00	ţ .	•	<u></u>
	orida Articles of Organization:	\$125.00	; ·		
Certified Co	<del>_</del>	\$30.00 (Optional)	<i>t</i> · .	• •	
Certificate of	of Status:	\$5.00 (Optional)			

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is	»:
Edward A Proenza, LLC	
(Must contain the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the p	orincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
124 Bent Tree Drive	124 Bent Tree Drive
Palm Beach Gardens, Florida 33418	Palm Beach Gardens, Florida 33418
<del></del>	
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Regions business entity with an active Florida registration.)	
The name and the Florida street address of the	registered agent are:
Edward A Proenza Nam	ne
790 Juno Ocean Walk, Suite Florida street address (P.C	<del>- · · · · · · · · · · · · · · · · · · ·</del>
•	
Juno Beach	FL 33408
City	Zip
liability company at the place designated in registered agent and agree to act in this capa statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 605, F.S
Edward fromza	
Registered Agent's Sig	anature (REOLIRED)
registered rigetit s Sig	initiae (NEQUINED)

(CONTINUED)

#### ARTICLE IV-

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

	d Member	
"MGR" = Manager		
Manager	Edward A Proenza	
	124 Bent Tree Drive,	
	Palm Beach Gardens, FL 334	18
<u> </u>		
	<del></del>	
	<del></del>	<del></del>
	<del></del>	
(Use attachment if ne	cessary)	
LE V: Other provision	s, if any.	
L <b>E V:</b> Other provisior	s, if any.	
LE V: Other provision iability Company shall l	TURE:	
LE V: Other provision iability Company shall l	TURE:	
	is, if any. be Manager managed.	
LE V: Other provision iability Company shall lead to the company shall	TURE:  Cocusigned by:  Edward fromya  2AS3DDFCBB2E4B7	
LE V: Other provision iability Company shall I REQUIRED SIGNA Signature of This document is exect	TURE:  ELward from a member or an authorized representative of the direction 605.0203 (1) (b), Florida Submitted in a document to the Department of State constitution.	Statutes. Lain aware th
LE V: Other provision iability Company shall I	TURE:  ELward from a member or an authorized representative of the direction 605.0203 (1) (b), Florida Submitted in a document to the Department of State constitution.	Statutes. Lain aware th

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