CHUUNIANO

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

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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

03/26/2024

NAME: OTIS PEARSON, LLC

TYPE OF FILING: CONVERSION

COST:

150.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Otis Pearson LLC		
	sulting Florida Limit	ed Company)
The enclosed Articles of Conversion, Articles Business Entity" into a "Florida Limited L		on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence concernir	ng this matter to:	
Jonathan Leder		
(Contact Person)		
Jonathan Leder, PLLC		
(Firm/Company)	·	
888 E. Las Olas Blvd, Suite 502		
(Address)		
Ft. Lauderdale, FL 33301		
(City, State and Zip Code) danny@voro.com		
E-mail Address: (to be used for future annual re	enor notifications)	
For further information concerning this ma	itter, please call:	
Jonathan Leder	at (305	514-0622
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amoundollars and drawn on a bank located in the		rocessed 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	S180.00 Filing and Certified Cop	Certificate of Status
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 and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

Otis Pearson LLC	is of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, common	a 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)
3/18/2021 on	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Artic Otis Pearson, LLC	eles of Organization:
(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>-</u>
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.	will not be listed as the
5. The plan of conversion has been approved in accordance with all applicable statutes.	
 The "Converted or Other Business Entity" has agreed to pay any members having appraise which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. 	al rights the amount-to

Signed this 124n day of March	2024	
Signature of Authorized Representative of Limit	ed Liability Company:	
Signature of Authorized Representative: Printed Name: Daniel Shamooil	Title: Member	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)	
Signature: Printed Name: Daniel Shamooil	Title: Member	
Signature:Printed Name:	Title:	
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 Off Directors or Officers have not been selected, an Inc.	Officer. corporator must sign.	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	
All others: Signature of an authorized person.		:
Fees:		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	rigi ra

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADTICT E.I. Name	
ARTICLE I - Name: The name of the Limited Liability Company is:	:
Otio Danzan III C	
Otis Pearson, LLC (Must contain the words "Limited Liabilit	ty Company, "L.L.C.," or "LLC.")
·	
ARTICLE II - Address:	winging office of the Limited Lightlity Commons in
The maining address and sideet address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
888 East Las Olas Blvd	888 East Las Olas Blvd
Suite 502	Suite 502
Fort Lauderdale, FL 33301	Fort Lauderdale, FL 33301
ARTICLE III - Registered Agent, Registered The Limited Limbility Company cannot serve as its own Regis business entity with an active Florida registration.)	
•	
The name and the Florida street address of the r	registered agent are:
Jonathan Leder PLLC	
Nam	IC
888 East Las Olas Blvd Suite	502
Florida street address (P.C	D. Box NOT acceptable)
Fort Lauderdale	FL 33301 Zip
City	Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete accept the obligations of my position as re	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. 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.
(CONTIN	NUED)

O CODE AC		
'MGR" = Manager	Create Energy, LLC	
MGR	888 East Las Olas Blvd Suite 502	
	Fort Lauderdale, FL 33301	
	Fort Labderdale, 1 L 33301	
<u>,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
LE V: Other provisions, if any.		
eas v. Outor provisions, it arry.		
DE V. Outor provisions, in any.		
REQUIRED SIGNATURE:	A)	
	A -	
REQUIRED SIGNATURE:	an authorized representative of a member	
REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that	·
REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that the degree felon the Department of State constitutes a third degree felon felon the degree felon the deg	·
Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S.	with section 605,0203 (1) (b). Florida Statutes, I am aware that	, 100 mm
Signature of a member or This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S.	with section 605,0203 (1) (b). Florida Statutes, I am aware that	

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

ARTICLE IV-